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

SA3E Long Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

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

FOR COPYRIGHT OFFICE USE ONLY							
DATE RECEIVED	AMOUNT						
08/28/2018	\$ ALLOCATION NUMBER						

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:			
Accounting	2018/1			
Period				
B	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the busine If there were different owners during the accounting period, only the owne a single statement of account and royalty fee payment covering the entire account. Check here if this is the system's first filing. If not, enter the system's ID LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	ess of the cable system on the last day of counting perioa	em the accounting period should s	
	CABLE ONE, INC.			
				00740720181
				007407 2018/1
				2010/1
	210 E. EARLL DRIVE			
	PHOENIX, AZ 85012-2626			
	FHOENIX, AZ 83012-2020			
С	INSTRUCTIONS: In line 1, give any business or trade names used to in			
	names already appear in space B. In line 2, give the mailing address of	the system, if diff	erent from the address give	n in space B.
System	1 IDENTIFICATION OF CABLE SYSTEM:			
	MAILING ADDRESS OF CABLE SYSTEM:			
	2 (Number, street, rural route, apartment, or suite number)			
	SHOW LOW, AZ 85901			
	(City, town, state, zip code)			
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comr	munity served below and rel	ist on page 1b
Area	with all communities.			
Served	CITY OR TOWN	STATE		
First	SHOW LOW	AZ		
Community	Below is a sample for reporting communities if you report multiple cha	1		1
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#
Sample	Alda	MD	A	1
	Alliance	MD	В	2
	Gering	MD	В	3

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

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
CABLE ONE, INC.			007407						
OABLE OIL, IIIO.			001401						
Instructions: List each separate community served by the cable system. A "communi in FCC rules: "a separate and distinct community or municipal entity (including unincor areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The formula of system identification hereafter known as the "first community." Please use it as the formula of the cable of the cable system.	porated communiti	es within unincorp you list will serve	orated	D Area Served					
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.									
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9).									
When reporting the carriage of television broadcast stations on a community-by-comm channel line-up designated by an alpha-letter(s) (based on your Space G reporting) are (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns	nd a subscriber gro	ate each commun up designated by	ity with a a number						
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	_					
SHOW LOW	AZ			First					
HOLBROOK	AZ			Community					
JOSEPH CITY	AZ			-					
NAVAJO COUNTY	AZ								
PINETOP LAKESIDE	AZ								
PINEVIEW WAGONWHEEL	AZ			Coo instructions for					
SNOWFLAKE	AZ			See instructions for additional information					
TAYLOR	AZ			on alphabetization.					
WINSLOW	AZ								
				Add rows as necessary.					
				Add Tows as fiecessary.					
			•						
				I					

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007407

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLO	OCK 1				BLOCK 2			
	NO. OF					NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE		CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:								
 Service to first set 	5,366	\$	40.00					
 Service to additional set(s) 	8,049							
 FM radio (if separate rate) 								
Motel, hotel	2,065	\$	12.75					
Commercial	220	\$	67.08					
Converter								
Residential								
Non-residential								
				1 ľ		1	T	

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

		BLO	CK 1				BLOCK 2		
CATEGORY OF SERVICE	R	ATE	CATEGORY OF SERVICE	RATE		CATEGORY OF SERVICE	R	ATE	
Continuing Services:			Installation: Non-residential						
 Pay cable 		15-17	Motel, hotel	\$	90.00		EXPANDED BASIC	\$	40.00
 Pay cable—add'l channel 	\$	9.00	Commercial	\$	90.00				
Fire protection			Pay cable	\$	30.00				
Burglar protection			Pay cable-add'l channel						
Installation: Residential			Fire protection						
First set		0-90	Burglar protection						
 Additional set(s) 	\$		Other services:						
• FM radio (if separate rate)			Reconnect	\$	90.00	Ī			
Converter			Disconnect			Ī			
			Outlet relocation	\$	30.00				
			Move to new address			ľ			
						ľ			

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007407 CABLE ONE, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form. Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity. For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up. CHANNEL LINE-UP AA 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION SIGN CHANNEL OF (Yes or No) CARRIAGE NUMBER **STATION** (If Distant) **KAET** 8 Ε PHOENIX,AZ Yes **KASW** 49 No PHOENIX,AZ See instructions for additional information **KAZT** PHOENIX,AZ 7 ı No on alphabetization. KAZT-2 I-M No 7 PHOENIX,AZ **KNXV** 15 Ν No PHOENIX,AZ Ν **KPHO** 17 No PHOENIX,AZ **KPNX** 12 N No MESA, AZ PHOENIX,AZ **KPNX-2** I-M 12 No **KSAZ** I 10 No PHOENIX,AZ **KTAZ** 39 ı No PHOENIX,AZ KTVK 24 ı No PHOENIX,AZ **KTVW** 33 No PHOENIX,AZ ı **KUTP** 26 ı No PHOENIX,AZ

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	NER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, II	NC.				007407	
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program base Substitute Basis is basis under specific FC Do not list the station station was carried List the station here, basis. For further in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA" WETA-simulcast). Column 2: Give the station on which your cable so Column 3: Indicate educational station, by (for independent multifor the meaning of the Column 4: If the st planation of local services	G, identify every system during the constructions in effect on the construction of the	y television st he accounting h June 24, 19 4), or 76.63 (r d in the next respect to any ations, or auth G—but do lis- titute basis. ace I, if the sta- terning substiff sign. Do not r h a station acc streams must beer the FCC has, WRC is Cha- te, WRC is Cha- te, WRC is Cha- ter station. whether the state of the state of the station. whether the state of the state of the state of the state of the page (v) of the state of the stat	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried to the station was carried to the station was carried to the station was station to the period of the station was assigned to the station is a network attion is a network attion is a network, "N-M" (I educational), contained to the station is a network of the stational), contained the stational is a network of the stational is a network of the stational in	(1) stations carried to carriage of certain (1e)(2) and (4))]; as a carried by your content of the Special Statement of the Special Statement of the Specia	es". If not, enter "No". For an ex-	G Primary Transmitters: Television
carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	ion on a part-tiion of a distant t entered into o a primary trans simulcasts, also ree categories e location of ea	me basis beca multicast stren n or before Jumitter or an aco penter "E". If , see page (v) ch station. Fo	ause of lack of a eam that is not s ine 30, 2009, be association repre you carried the of the general in U.S. stations,	activated channel of subject to a royalty etween a cable sys- esenting the primal channel on any of instructions locate list the community	tering "LAC" if your cable system capacity. It payment because it is the subject stem or an association representing ry transmitter, enter the designather basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing		nnel line-ups,		space G for each		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION	` ,	(If Distant)		

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FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007407	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you had cable system carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the	G, identify even dry to system during the cons in effect or a fall on a substant also in space only on a substant also in each case when the cast of the constant also in each case when the constant static in on a part-time in on a part-time in the constant static in a primary trans in simulcasts, also tree categories in constant of each categories in constant of each categories in constant in the categories in constant in the categories in categories in a	y television standard and accounting an June 24, 1984, or 76.63 (rd in the next prespect to any ations, or auth G—but do list titute basis. In the standard account of the station account of the station account of the station. In the station account of the station account of the station. In the station account of the station. In the station account of the station account of the station. In the station account of the station account of the station account of the station. In the station of the station account of the station of the station of the station. In the station of the station. In the station account of the station account of the station. In the station account of the station. In the station account of the station account of the station. In the station account of the	period, except period, except period, except period, except per period, except per period, per	(1) stations carried to carriage of certa 1(e)(2) and (4))]; as a carried by your case special Statement of both on a substitution, see page (v) on program service: er-the-air designation of the television statistical program of the television of t	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your dering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utilizing	ig multiple char	inei iine-ups,	use a separate	space G for each	спаппет ше-ир.	
	T	CHANN	EL LINE-UP	AC		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
					<u> </u>	
		[
					<u> </u>	
					<u> </u>	
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LEGAL NAME OF OWNER OF CABLE ONE, INC.						
CABLE ONE, INC.	CABLE SYST	TEM:			SYSTEM ID#	Name
					007407	
PRIMARY TRANSMITTERS: 1	FELEVISION					
carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Statio basis under specific FCC rule. Do not list the station here station was carried only control to the station here, and a basis. For further informa in the paper SA3 form. Column 1: List each state each multicast stream associast stream as "WETA-2". SWETA-simulcast). Column 2: Give the char	in during the in effect on J by (2) and (4), is explained in instance of the instance of the inspace of the ins	e accounting June 24, 198 I, or 76.63 (ri in the next p spect to any ons, or auth but do list ute basis. e I, if the sta rning substitu gn. Do not re a station acc reams must r the FCC h WRC is Cha	period, except 81, permitting the eferring to 76.6 paragraph. distant stations orizations: at in space I (the tion was carried ute basis station eport origination coording to its own be reported in cas assigned to the effect of the same as assigned to the effect of th	(1) stations carried e carriage of certa 1(e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program services er-the-air designation of the television statistics and the television statistics are carried as the television statistics and column 1 (list each television statistics).	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel	G Primary Transmitters: Television
educational station, by enter (for independent multicast), For the meaning of these ter Column 4: If the station in planation of local service are Column 5: If you have excable system carried the discarried the distant station on For the retransmission of a written agreement enter the cable system and a primition "E" (exempt). For simula explanation of these three column 6: Give the locar	ring the lette "E" (for non rms, see pa is outside th ea, see page ntered "Yes' stant station n a part-time f a distant m red into on con arry transmit casts, also e tategories, s stion of each dian stations	er "N" (for ne acommercial age (v) of the se local serve (v) of the se local serve (v) of the se local serve e (v) of the se local serve administration of the se local serve and the se local serve and the serve a	etwork), "N-M" (i educational), o e general instruct rice area, (i.e. "co general instructi 4, you must cor accounting peric ause of lack of a sam that is not s ne 30, 2009, be ssociation repre- you carried the of the general i r U.S. stations, le the name of the	for network multic r "E-M" (for nonco ctions located in the listant"), enter "Ye ons located in the nplete column 5, od. Indicate by ent ctivated channel of ubject to a royalty tween a cable sys senting the primal channel on any of nstructions locate list the community with	es". If not, enter "No". For an expaper SA3 form. If not, enter "No". For an expaper SA3 form. If your cable system capacity. If payment because it is the subject stem or an association representing the transmitter, enter the designation in the paper SA3 form. If which the station is licensed by the which the station is identifed.	
		CHANNI	EL LINE-UP	AD	·	
1. CALL 2. B'0				AU		
SIGN CH	CAST 3. HANNEL UMBER	. TYPE OF STATION		5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
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SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN CH	HANNEL	OF	4. DISTANT?	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					ACCOUNT	NG PERIOD: 2018/1
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	IC.				007407	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	system during the cons in effect or i.61(e)(2) and (he accounting n June 24, 198 4), or 76.63 (r	period, except 81, permitting th referring to 76.6	(1) stations carrie e carriage of certa	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary Transmitters:
Substitute Basis S	stations: With r	respect to any	distant stations	carried by your c	able system on a substitute program	Television
	here in space	G—but do list		e Special Stateme	ent and Program Log)—if the	
	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located	
Column 1: List eac	h station's call	•		. •	s such as HBO, ESPN, etc. Identify	
			•	•	tion. For example, report multi- n stream separately; for example	
Column 2: Give the			-		on for broadcasting over-the-air in may be different from the channel	
	in each case v	whether the st			pendent station, or a noncommercial	
	cast), "E" (for n	oncommercial	l educational), o	r "E-M" (for nonco	ast), "I" (for independent), "I-M" mmercial educational multicast). pe paper SA3 form.	
Column 4: If the sta planation of local servi	ation is outside ce area, see pa	the local servage (v) of the	vice area, (i.e. "d general instructi	distant"), enter "Ye ions located in the	s". If not, enter "No". For an ex- paper SA3 form.	
cable system carried the carried the carried the distant stati	ne distant statio ion on a part-tir	on during the a	accounting perionals	od. Indicate by ent		
of a written agreement	entered into or	n or before Ju	ine 30, 2009, be	tween a cable sys	payment because it is the subject stem or an association representing transmitter, enter the designa-	
tion "E" (exempt). For sexplanation of these the	simulcasts, also ree categories	o enter "E". If ; , see page (v)	you carried the o	channel on any ot instructions locate	her basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the	
	Canadian statio	ns, if any, give	e the name of th	ne community with	which the station is identifed.	
		CHANN	EL LINE-UP	AE		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		

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

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE S	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				007407	
PRIMARY TRANSMITTE	ERS: TELEVISION	N				
In General: In space C carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th	G, identify ever system during to ions in effect on ions in estations: With ions in space only on a substand also in space only on a substand also in space in each case with ions in effect of ions in each case with ending in each case in each case with ending in each case in each end in each	y television structure by television structure 24, 194 4), or 76.63 (radio the next) respect to any attions, or auth G—but do list titute basis. ace I, if the state that it is sign. Do not radio the station according to the station according to the station. Whether the station. Whether the station. Whether the station according to the local servage (v) of the the local servage (v) of the es" in column on during the same basis becar multicast streen or before Jumitter or an according to the content of the content of the station or before Jumitter or an according to the content of the content of the content of the station or before Jumitter or an according to the content of the content of the station of	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations in the station was carried tute basis station to the period of the report origination coording to its owner be reported in the station is a network of the station is a network of the stational, continuity in the stational of th	(1) stations carried to carriage of certa 1(e)(2) and (4))]; as a carried by your case special Statement of both on a substitution, see page (v) on program services er-the-air designation of the television station of the television of the t	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing		. ,		•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AF		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
						
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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	FORM SA3E. PAGE 3.						
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 PCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(()/2) and (4), 76.63 (referring to 76.63 (referring to 76.61(e)/2) and (4)); and (2) cartain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife PCC rules, regulations, or authorizations: 1.50 not list the station here, and also in space (1, if the station was carried both on a substitute basis. It set station here, and also in space (1, if the station was carried both on a substitute basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream sascoiated with a station according to its over-the-air designation. For example, report multicast stream susceptions are substituted to a stream separately; for example wETA-simulcast). Column 1: 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 and instructions located in the paper SA3 form. Column 3: Indicate in each case whether the station is a network station, an indepen			STEM:			SYSTEM ID#	Name
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, permiting the carriage of certain network programs [sections 76.58(q)(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. The station was carried by your cable system on a substitute program basis. For further information on coreming substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "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 is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast). "FC (for independent), "I-M" (for independent multicast). "FC (for network)," n-M" (for network multicast). "FC (for independent multicast). "FC (for network) of the general instructions located in the paper SA3 form. Column 4: If the station is outsi	CABLE ONE, IN	NC.				007407	1140
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)	PRIMARY TRANSMITTE	ERS: TELEVISIO	ON				
CHANNEL LINE-UP AG 1. CALL SIGN 2. B'CAST CHANNEL OF (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bass Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you hable system carried the distant stat For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the	G, identify every system during the consistency of	y television standard accounting in June 24, 194, or 76.63 (rd d in the next prespect to any attions, or auth G—but do list titute basis. In the standard account in a station account in a station account in a station account in the station. In the station account in the station. In the station account in the station. In the station account in the local server in column in during the same basis became the station in during the same basis became in the station in the same basis became in the station in the station in the station. In the station in the station in the station in the station in the station. For the station is seen page (v) of the station in the s	period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: a tit in space I (the stition was carried ute basis station coording to its own be reported in the referring to a sassigned to annel 4 in Wash ation is a network), "N-M" (I educational), control of the general instruction of the same that is not some 30, 2009, be a specially of the general instruction of the general instruction.	in (1) stations carried be carriage of certa- ine carriage of certa- ine (2) and (4))]; as a carried by your of the Special Statement of both on a substitution, see page (v) on a program service er-the-air designal column 1 (list each of the television station on the television station on the television station of "E-M" (for noncontrol located in the distant"), enter "Ye ions located in the implete column 5, so d. Indicate by entactivated channel of subject to a royalty etween a cable system of the primal channel on any of instructions located list the community.	and only on a part-time basis under alin network programs [sections and (2) certain stations carried on a stable system on a substitute program tent and Program Log)—if the state basis and also on some other of the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multinater stream separately; for example sion for broadcasting over-the-air in may be different from the channel expendent station, or a noncommercial east), "I" (for independent), "I-M" commercial educational multicast). The paper SA3 form. The stating the basis on which your tering "LAC" if your cable system capacity. If your payment because it is the subject stem or an association representing the paper SA3 form. The stating the basis, enter "O." For a further and in the paper SA3 form.	Primary Transmitters:
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF (Yes or No) CARRIAGE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			·	•		-
SIGN CHANNEL OF (Yes or No) CARRIAGE				EL LINE-UP			_
						6. LOCATION OF STATION	
	SIGN	_	_	,			
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FORM SA3E. PAGE 3. LEGAL NAME OF OWN	IER OF CABLE S	YSTEM:			SYSTEM ID#	
CABLE ONE, IN	NC.				007407	Name
PRIMARY TRANSMITTE	RS: TELEVISION	ON				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76	system during to ions in effect of 6.61(e)(2) and (he accounting n June 24, 19 (4), or 76.63 (i	period, except 81, permitting the referring to 76.6	(1) stations carrie	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a	G Primary
substitute program bas Substitute Basis S				s carried by your c	able system on a substitute program	Transmitters: Television
basis under specifc FC	CC rules, regula	ations, or auth	orizations:		ent and Program Log)—if the	Television
	and also in spa formation cond	ace I, if the sta			ute basis and also on some other f the general instructions located	
Column 1: List eac	h station's call	-		. •	s such as HBO, ESPN, etc. Identify tion. For example, report multi-	
			•	•	n stream separately; for example	
its community of licens	se. For example	e, WRC is Ch	•		on for broadcasting over-the-air in may be different from the channel	
on which your cable sy Column 3: Indicate			tation is a netwo	ork station, an inde	ependent station, or a noncommercial	
educational station, by	entering the le	etter "N" (for n	etwork), "N-M" (for network multic	ast), "I" (for independent), "I-M"	
(for independent multion (for the meaning of the	,,		,,	•	ommercial educational multicast).	
					es". If not, enter "No". For an ex-	
planation of local servi						
•			•	-	stating the basis on which your rering "LAC" if your cable system	
carried the distant stat	ion on a part-tii	me basis beca	ause of lack of a	ectivated channel of	capacity.	
					payment because it is the subject	
-				•	stem or an association representing ry transmitter, enter the designa-	
•			•	• .	her basis, enter "O." For a further	
					d in the paper SA3 form.	
				•	to which the station is licensed by the	
Note: If you are utilizin				•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AH		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	U. LOGATION OF STATION	
0.0.1	NUMBER	STATION	(10001110)	(If Distant)		
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	IC.				007407		
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 07 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for							
For the retransmiss	ion of a distant	multicast stre	am that is not s	ubject to a royalty	payment because it is the subject		
the cable system and a	a primary transi	mitter or an as	ssociation repre	senting the primar	ry transmitter, enter the designa- her basis, enter "O." For a further		
explanation of these th	ree categories,	, see page (v)	of the general i	nstructions locate	d in the paper SA3 form. to which the station is licensed by the		
FCC. For Mexican or C Note: If you are utilizin				•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	Al			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)			
	NOMBLIX	OTATION		(II Distant)			
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				007407		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e							
FCC. For Mexican or (Note: If you are utilizing		. ,		•			
Note. If you are utilizing	ig multiple chai	•	•	•	спаппет ппе-ир.		
	1	CHANN	EL LINE-UP	AJ			
1. CALL	2. B'CAST		4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name		
CABLE ONE, IN					007407			
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), 07.66.16(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "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-N"" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for noncommercial educational) multic								
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	r U.S. stations, e the name of th	list the community ne community with	to which the station is licensed by the which the station is identifed.			
	1	CHANN	EL LINE-UP	AK				
1. CALL	2. B'CAST CHANNEL	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION			
SIGN	NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)				
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CABLE ONE, INC. PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation for program step to the call the station. Column 1: List each station station according to its over-the-air designation for program station, by entering the letter "N" (for nework multicast), "I' (for indepen	FORM SA3E. PAGE 3.							
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 PCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(1)(2) and (4), 76.163 (referring to 76.61(e)(2) and (4)); and (2) cartain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc PCC rules, regulations, or authorizations: 10 not list the station here; and also in space (1, if the station was carried both on a substitute basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, were called 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 multicast). Fe' (for noncommercial educational), or "E-M' (for noncommercial educational multicast), Fe' (for noncommercial educational), or "E-M' (for noncommercial educational multicast), Fe' (for noncommercial educational), or "E-M' (for noncommercial educational multicast), Fe' (for noncommercial educational), or "E-M'		YSTEM:		SYSTEM ID#	Name			
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, permiting 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 paragraphs. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specif FCC rules, regulations, or authorizations: **Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. **List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. **Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as "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 is a network station, an independent station, or a noncommercial educational multicast). **Column 3: Indicate in each case whether the station is a network station, an independent station, or a nexplanation of 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	CABLE ONE, INC.			007407				
Courted 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 76.58(d)(2) and (4), 76.61(e)(2) and (4), 76.61	PRIMARY TRANSMITTERS: TELEVISION							
CHANNEL LINE-UP AL 1. CALL SIGN 2. B'CAST CHANNEL OF 4. DISTANT? (Yes or No) CARRIAGE 6. LOCATION OF STATION CARRIAGE	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 76.69(d)(2) and (4), 76.61 (e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational) related in the paper SA3 f							
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CHANNEL OF (Yes or No) CARRIAGE 6. LOCATION OF STATION	J sapara	• • •	•					
SIGN CHANNEL OF (Yes or No) CARRIAGE								
				6. LOCATION OF STATION				
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				007407	Nume	
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M"							
For the meaning of the Column 4: If the sta	ese terms, see ation is outside	page (v) of the the local serv	e general instruction (i.e. "c	ctions located in the distant"), enter "Ye	es". If not, enter "No". For an ex-		
planation of local service area, see page (v) of the general instructions located in the paper SA3 form. Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.							
For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form. Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.							
		CHANN	EL LINE-UP	AM			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
		<u> </u>					
					<u> </u>		
							

FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name		
CABLE ONE, IN	IC.				007407			
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 ind								
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		CHANN	EL LINE-UP	AN				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			
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FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name			
CABLE ONE, IN					007407				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream	G, identify every eystem during the consistence of 6.61(e)(2) and (6.61(e)(2)	y television strate accounting a June 24, 194, or 76.63 (f d in the next prespect to any strions, or auth G—but do list titute basis. In the state of the state o	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the ation was carried ute basis station eport origination cording to its ov	(1) stations carried the carriage of certain (e)(2) and (4))]; as as carried by your come Special Statement d both on a substitutions, see page (v) or in program services ter-the-air designation	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example	G Primary Transmitters: Television			
its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local servic Column 5: If you dicable system carried the distant static For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the	se. For example ystem carried the in each case we entering the lecast), "E" (for no ese terms, see pation is outside ce area, see pation on a part-tirion of a distant tentered into on a primary transisimulcasts, also aree categories, e location of ea Canadian statio	e, WRC is Chane station. whether the station. whether the station is the commercial page (v) of the the local servers in column is me basis because multicast street or before Jumitter or an action of the column is see page (v) ch station. Forns, if any, givense station.	ation is a network, "N-M" (I educational), or e general instructive area, (i.e. "or general instructor, you must contaccounting period accounting to the social accounting t	ork station, an inder for network multicor "E-M" (for noncoctions located in the distant"), enter "Ye ions located in the mplete column 5, so d. Indicate by entactivated channel of subject to a royalty etween a cable system in the primary channel on any of instructions locate list the community with	paper SA3 form. stating the basis on which your sering "LAC" if your cable system capacity. payment because it is the subject stem or an association representing the basis, enter "O." For a further d in the paper SA3 form. To which the station is licensed by the which the station is identifed.				
		CHANN	EL LINE-UP	AO					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				007407		
PRIMARY TRANSMITTE	ERS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e							
Note: If you are utilizing		. ,		•			
,	-		EL LINE-UP	•			
		1	1				
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
SIGN	NUMBER	STATION	,	(If Distant)			
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#	Name		
CABLE ONE, IN	NC.				007407			
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bass Substitute Basis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-simulcast). Column 2: Give the	G, identify even system during to ions in effect or 6.61(e)(2) and (sis, as explaine stations: With a CC rules, regulare there in space only on a substant also in spatiformation concurrent. The station's call associated with a channel number of the station of the station of the station of the station's call associated with a channel number of the station of the station of the station's call associated with a channel number of the station	y television stane accounting on June 24, 199 (4), or 76.63 (r) d in the next perspect to any stions, or auth G—but do list titute basis. Indeed, if the state erning substitute sign. Do not reast a station accept the FCC here.	period, except 81, permitting the referring to 76.6 paragraph. distant stations orizations: tit in space I (the attion was carried ute basis station eport origination cording to its ow- be reported in on as assigned to	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program service er-the-air designation of the television statistics.	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program and Program Log)—if the aute basis and also on some other at the general instructions located as such as HBO, ESPN, etc. Identify attion. For example, report multi- a stream separately; for example and for broadcasting over-the-air in	G Primary Transmitters: Television		
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		CHANN	EL LINE-UP	AQ				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name			
CABLE ONE, IN					007407				
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 as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network, "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational) or "E-M" (for									
Column 6: Give the	e location of ea Canadian statio	ch station. Fo	r U.S. stations, e the name of th	list the community ne community with	y to which the station is licensed by the n which the station is identifed.				
	1	CHANN	EL LINE-UP	AR					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)					
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FORM SA3E. PAGE	3.						
LEGAL NAME OF O	WNER OF CABLE S	YSTEM:			SYSTEM ID#	Name	
CABLE ONE	, INC.				007407		
RIMARY TRANSMI	TTERS: TELEVISION	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 77.6.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational in							
Note: If you are util	izing multiple cha	nnel line-ups,	use a separate	space G for each	channel line-up.		
		CHANN	EL LINE-UP	AS			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
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FORM SA3E. PAGE 3.								
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name		
CABLE ONE, IN	NC.				007407			
PRIMARY TRANSMITTI In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bass Substitute Basis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-simulcast). Column 2: Give the	ers: TELEVISIO G, identify even system during the ions in effect or 6.61(e)(2) and (sis, as explaine stations: With In CC rules, regular In here in space only on a subs and also in spatiformation concurrent. In station's call associated with -2". Simulcast	y television stane accounting on June 24, 199 (4), or 76.63 (r) d in the next perspect to any stions, or auth G—but do list titute basis. Indeed, if the state erning substitute sign. Do not reast a station accept the FCC here.	period, except 81, permitting the eferring to 76.6 paragraph. I distant stations orizations: It in space I (the tition was carried ute basis station eport origination coording to its own be reported in oas assigned to	(1) stations carried to carriage of certain (e)(2) and (4))]; as carried by your context of both on a substitution, see page (v) on program service er-the-air designation of the television statistics.	and low power television stations) ad only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in	G Primary Transmitters: Television		
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	1	CHANN	EL LINE-UP	AT				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name	
CABLE ONE, IN	NC.				007407		
PRIMARY TRANSMITTE	ERS: TELEVISIO	ON					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4), 76,61(e)(2) and (4), or 76,63 (referring to 76,61(e)(2) and (4))], and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specife FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "F" (for independent), "I-M" (for							
-		CHANN	EL LINE-UP	All			
			EL LINE-UP	-			
1. CALL		3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)			
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FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
CABLE ONE, IN	NC.				007407	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	ON				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 0, 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as sociated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for in						
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of a written agreement	entered into o	n or before Ju	ine 30, 2009, be	tween a cable sys		
tion "E" (exempt). For	simulcasts, also	o enter "E". If	you carried the	channel on any ot	ther basis, enter "O." For a further designation of the basis, enter "O." For a further d in the paper SA3 form.	
Column 6: Give the	e location of ea	ch station. Fo	r U.S. stations,	list the community	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing				•		
		CHANN	EL LINE-UP	AV		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
	ļ	<u> </u>			ļ	
		<u> </u>				
		<u> </u>				
		<u> </u>			ļ	

FORM SA3E. PAGE 3.	FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		STEM:			SYSTEM ID#	Name		
CABLE ONE, IN					007407			
_								
In General: In space G, identify every television station (including translator stations and low power television stations) carried by our cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4), 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space (1) (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for in						G Primary Transmitters: Television		
Note: If you are utilizing				•				
		CHANN	EL LINE-UP	AW				
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION			

ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007407 CABLE ONE. INC. PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION AM or FM

1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."	Name Substitute Carriage: Special tatement and Program Log
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."	Substitute Carriage: Special tatement and
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Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.	
WHEN SUBSTITUTE 7. REASON	
SUBSTITUTE PROGRAM 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S CALL SIGN 4. STATION'S LOCATION AND DAY FROM — TO CARRIAGE OCCURRED FOR DELETION 5. MONTH 6. TIMES DELETION AND DAY FROM — TO	

ACCOUNTING PERIOD: 2018/1 FORM SA3E. PAGE 6.

Name LEGAL NAME OF OWNER OF CABLE SYSTEM:

CABLE ONE, INC.

SYSTEM ID#

007407

J

Part-Time Carriage Log

PART-TIME CARRIAGE LOG

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

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

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

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

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

	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name					
CA	ABLE ONE, INC.	007407						
Ins all a (as	tructions: The figure you give in this space determines the form you fle and the amour amounts (gross receipts) paid to your cable system by subscribers for the system's sec identified in space E) during the accounting period. For a further explanation of how to ge (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s)	condary transmission service	K Gross Receipts					
IMI	during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	\$ 1,672,248.00 (Amount of gross receipts)						
ColColIf y feeIf y	YRIGHT ROYALTY FEE Juctions: Use the blocks in this space L to determine the royalty fee you owe: Implete block 1, showing your minimum fee. Implete block 2, showing whether your system carried any distant television stations. In our system did not carry any distant television stations, leave block 3 blank. Enter the a from block 1 on line 1 of block 4, and calculate the total royalty fee. In our system did carry any distant television stations, you must complete the applicable prompanying this form and attach the schedule to your statement of account.		Copyright Royalty Fee					
▶ If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below.								
▶ 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.								
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entered on line						
Block 1	system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K \$ 1,672,248.00							
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.							
	This is your minimum fee. \$ 17,792.72							
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colu "Yes" in this block. • Did your cable system carry any distant television stations during the accounting per X Yes—Complete the DSE schedule. No—Leave block 3 below blank and continued the property of	mn 4, you must check						
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero	\$ 4,448.18						
	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00						
	Line 3. Add lines 1 and 2 and enter here	\$ 4,448.18						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 17,792.72	Cable systems					
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter zero.		submitting additional deposits under					
	Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	Section 111(d)(7) should contact the Licensing					
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the appropriate					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 18,517.72	form for submitting the additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. general instructions located in the paper SA3 form for more information.)	(See page (i) of the						

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.								
	1. Enter the total number of channels on which the cable system carried television broadcast stations								
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services								
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)								
for Further Information	Name EMERSON YEARWOOD Telephone 602-364-6195								
	Address 210 E. EARLL DRIVE (Number, street, rural route, apartment, or suite number)								
	PHOENIX, AZ 85012-2626 (City, town, state, zip)								
	Email emerson.yearwood@cableone.biz Fax (optional) 602-364-6013								
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.								
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)								
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or								
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or								
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.								
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 								
	X /s/ Raymond Storck								
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and press the "F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.								
	Typed or printed name: RAYMOND STORCK								
	Title: VICE PRESIDENT (Title of official position held in corporation or partnership)								
	Date: August 28, 2018								

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

U.S. Copyright Office

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407	Name
CABLE ONE, INC. 007407	
	Special Statement Concerning Gross Receipts
paper SA3 form. 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?	Exclusion
X NO	
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Name Mailing Address Mailing Address	
INTEREST ASSESSMENTS	
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.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
xdays	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
x 0.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	
(interest charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, accounting period, and ID number as given in the original filling.	
Owner	
Address	
First community served	
Accounting period	
ID number	

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ACCOUNTING PERIOD: 2018/1

INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

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

FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

Step 2: Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space C of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1)

calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

Step 3: Multiply the result of step 1 by the result of step 2. This gives

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

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

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

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

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

TOTAL OF DSEs

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

THE ROYALTY FEE

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

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

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

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

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

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

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

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

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

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

EXAMPLE:

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

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



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

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

		40,0000				
First Subscriber Group		Second Subscriber Group		Third Subscriber Group		
(Santa Rosa)		(Rapid City and Bodega Bay)		(Fairvale)		
Gross receipts	\$310,000.00	Gross receipts	\$170,000.00	Gross receipts	\$120,000.00	
DSEs	2.472	DSEs .	1.083	DSEs .	1.389	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	
\$310,000 x .01064 x 1.0 =	3,298.40	\$170,000 x .01064 x 1.0 =	1,808.80	\$120,000 x .01064 x 1.0 =	1,276.80	
\$310,000 x .00701 x 1.472 =	3,198.80	\$170,000 x .00701 x .083 =	98.91	\$120,000 x .00701 x .389 =	327.23	
Base rate fee	\$6,497.20	Base rate fee	\$1,907.71	Base rate fee	\$1,604.03	

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

ACCOUNTING PERIOD: 2018/1

DSE SCHEDULE. PAG	E 11. (CONTINUED)									
4	LEGAL NAME OF OWNER OF CABL	LE SYSTEM:			S	STEM ID#				
1	CABLE ONE, INC.					007407				
	SUM OF DSEs OF CATEGOR	RY "O" STATION	NS:							
	Add the DSEs of each statio		10.							
	Enter the sum here and in line 1 of part 5 of this schedule.									
	The struction of									
2	Instructions: In the column headed "Call	Sign": list the ca	Il signs of all distant stations	identified by t	the letter "O" in column 5					
_	of space G (page 3).	oigii . list tile ca	ii signis or all distant stations	s identified by t	ine letter O in column 5					
Computation	In the column headed "DSE			as "1.0"; for	each network or noncom-					
of DSEs for	mercial educational station, gi	ve the DSE as ".2								
Category "O"			CATEGORY "O" STATION	IS: DSEs						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
	KAET	0.250								
Add rows as										
necessary.										
Remember to copy										
all formula into new										
rows.										
		<u></u>		 						
				·						
						(

Name	CABLE ONE	WNER OF CABLE SYSTEM:						S	YSTEM ID# 007407
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	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.								
	1 CALL							6 DS	:E
	SIGN	OF HOU CARRIE SYSTEM	JRS D BY A	OF HOURS STATION ON AIR	CARRIAG VALUE	ЭE	VALUE		
			÷		=	X		=	
					=				
			÷		=	X		=	
			÷ ÷		= =	X X		<u>=</u>	
	Add the DSEs of	OF CATEGORY LAC Sof each station. m here and in line 2 of pa		dule,	>		0.00		
Computation of DSEs for Substitute-Basis Stations	space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted								m).
		SUE	BSTITUTE-BA	ASIS STATION	S: COMPUTA	ATION OF	DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR		1. CALL SIGN	2. NUM OF PRO	BER GRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=			÷		=
		- -		=			+		=
		÷		=			÷		=
		÷		=			÷		= <u></u>
	Add the DSEs of	OF SUBSTITUTE-BASI of each station. m here and in line 3 of pa		dule,	▶		0.00		
5 Total Number	number of DSEs	R OF DSEs: Give the ame applicable to your system DSEs from part 2 ●		xes in parts 2, 3, and	I 4 of this schedul	e and add the	n to provide t	0.25	
of DSEs		DSEs from part 3 •				<u>-</u>		0.00	
	3. Number of	DSEs from part 4 ●				-		0.00	
	TOTAL NUMBE	R OF DSEs							0.25

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2018/1

LEGAL NAME OF C		SYSTEM:					S'	YSTEM ID#	Name			
CABLE ONE,								007407				
Instructions: Block A:	ck A must be com	pleted.										
 If your answer if schedule. 	"Yes," leave the re	emainder of p	oart 6 and part	7 of the DSE sche	edule blank ar	nd complete pa	art 8, (page 16) of	the	6			
	"No," complete blo			FEL EVILOLON M	ADICETO				Computation of			
Is the cable system	m located wholly o			TELEVISION M.		ection 76.5 of	FCC rules and re	gulations in	3.75 Fee			
effect on June 24,	, 1981?		•					9				
	nplete part 8 of the plete blocks B and		DO NOT COM	PLETE THE REMA	AINDER OF F	PART 6 AND 7						
X No—comp	DIELE DIOCKS D'AITG											
Onlyman 4:	11.60 0.1			IAGE OF PERI								
Column 1: List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry CALL SIGN under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.)												
Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981. PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to CARRIAGE 76.61(b)(c)]												
	B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1) C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d) D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the											
instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 198′ G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5) M Retransmission of a distant multicast stream.												
Column 3:	List the DSE for	each distant	station listed in	n parts 2, 3, and 4	of the schedu	ıle.						
	*(Note: For those this schedule to		•	etter "F" in column	1 2, you must	complete the v	vorksheet on pag	e 14 of				
1. CALL	2. PERMITTED	3. DSE	1. CALL	2. PERMITTED	3. DSE	1. CALL	2. PERMITTED	3. DSE				
SIGN KAET	BASIS	0.25	SIGN	BASIS		SIGN	BASIS					
								0.25				
		В	LOCK C: CC	MPUTATION OF	F 3.75 FEE							
Line 1: Enter the	e total number of	DSEs from	part 5 of this	schedule				0.25				
Line 2: Enter the	e sum of permitte	ed DSEs from	m block B ab	ove			-	0.25				
Line 3: Subtract (If zero, I				r of DSEs subject 7 of this schedu		rate.		0.00				
Line 4: Enter gro	oss receipts from	ı space K (p	age 7)				x 0.03	375	Do any of the DSEs represent partially			
Line 5: Multiply I	line 4 by 0.0375	and enter su	um here				x		permited/ partially nonpermitted			
Line 6: Enter tota	al number of DS	Es from line	3						carriage? If yes, see part 9 instructions.			
Line 7: Multiply I	line 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7)			0.00				

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407										
		BLOCK	A: TELEVIS	ION MARKET	S (CONTIN	UED)				
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6	
									Computation of 3.75 Fee	
		• • • • • • • • • • • • • • • • • • • •						•••••		
								•••••		
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Name	CABLE ONE, IN		/STEM:						S	907407				
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried prior Column 1: List the or Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the FORAM APart-time spicate) For Fore Fore Fore Fore Fore Fore Fore F	or to June 25, 196 call sign for each the DSE for this the accounting p the basis of carric CC rules and reg ecialty programm (d)(1),76.61(e)(1) rogramming: Car (e)(3)). arriage under cer all instructions in the station's DSE the DSE figures B, column 3 of p information you get the post of the post of the post of the post of post of the post of the post of post of the post of post of the post of the post of post of the post of post of the post of the post of post of the	81, under former distant station for a sing seriod and year in iage on which the judations cited be sing. Carriage, or or 76.63 (referriage under FCC train FCC rules, referringe to the paper SA3 for the current solisted in column part 6 for this statigive in columns 2	r FCC rules gov dentifed by the gle accounting p n which the can re station was or the apart-time baring to 76.61(e) C rules, sections regulations, or a form. accounting per ns 2 and 5 and tion. 2, 3, and 4 mus	/err let per ria arr tho asi (1) s 7	entifed by the letter "F" ning part-time and subter "F" in column 2 of priod, occurring between ge and DSE occurred ied by listing one of the se in effect on June 24 s, of specialty program.)). 6.59(d)(3), 76.61(e)(3) thorizations. For further disast as computed in parts the smaller of the two see accurate and is subjected.	stitute carri- part 6 of the n January 1 (e.g., 1981/ e following I, 1981. Iming under n, or 76.63 (in r explanation 2, 3, and 4 of figures her	age. DSE schedule, 1978 and Juri 1) etters FCC rules, so referring to on, see page (v of this schedule. This figure	ections vi) of the should be	981 ne entere				
		PERMITTED	DSE FOR STA	TIONS CARRIE	ED	ON A PART-TIME AN	ID SUBSTI	TUTE BASIS			٦			
	1. CALL	2. PRIOR	3. ACC	COUNTING		4. BASIS OF	5. PF	RESENT	6. P	ERMITTED				
	SIGN	SIGN DSE PERIOD CARRIAGE DSE												
					•••••									
					••••						-			
											=			
7	Instructions: Block A In block A:	nust be comple	eted.											
Computation	If your answer is	"Yes," complete	blocks B and C,	below.										
of the	If your answer is	"No," leave block	ks B and C blank	cand complete	pa	art 8 of the DSE schedu	ule.							
Syndicated			BLOCK	(A: MAJOR	TE	ELEVISION MARK	ET							
Exclusivity	la annualita a si lla a		' I 100 '-			lander de la de la constant de la decembra de la constant de la decembra de la constant de la decembra de la d	0.5 - (.500		0.4	40040				
Surcharge	l <u> </u>	•		r television mari	кет	t as defined by section 7		ruies in ettect J	une 24,	1981?				
	Yes—Complete	blocks B and C	•			No—Proceed to	рап в							
	BLOCK B: Ca	arriage of VHF/G	rade B Contour	Stations		BLOCK	C: Compu	tation of Exem	pt DSE	8				
	Is any station listed in commercial VHF station	ion that places a				Was any station listed nity served by the cab	le system p							
	or in part, over the cal	•				to former FCC rule 76	,							
	Yes—List each st	tation below with it		nitted DSE		Yes—List each st			ate permi	tted DSE				
	No Enter Zero d	ina proceed to par	. 0.			X NO Enter 2010 di	na proceed t	o part o.						
	CALL SIGN	DSE	CALL SIGN	DSE		CALL SIGN	DSE	CALL SIG	SN	DSE				
		ļ						•••••						
		 												
			TOTAL DSEs	0.00				TOTAL DS	Es	0.00				
		<u> </u>		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					-					

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC.	SYSTEM ID# 007407	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,672,248.00	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	of the Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC? Yes—Complete section 3 below. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSI is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	E	
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section.1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here	_	
	E. Add lines A and D. This is your surcharge.		
	Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET	•	
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSI is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	E	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	(CABLE ONE, INC.	007407
7 Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank. A. Enter 0.00300 of gross receipts (the amount in section 1). B. Enter 0.00189 of gross receipts (the amount in section 1). C. Multiply line B by 3.000 and enter here. D. Enter 0.00089 of gross receipts (the amount in section 1). E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here. F. Multiply line D by line E and enter here. G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7) Syndicated Exclusivity Surcharge.	
8 Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. or answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. or answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers ocated within that station's local service area and others were located outside that area. For the definition of a station's "local area," see page (v) of the general instructions.	low
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS	
	• Did v	our cable system retransmit the signals of any partially distant television stations during the accounting period?	
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.	
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE	
	Section 1	Enter the amount of gross receipts from space K (page 7)	00_
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)	.25
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1).	

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2018/1

	AME OF OWNER OF CABLE SYSTEM: LE ONE, INC.	SYSTEM ID# 007407	Name
Section	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		
4	and regard in costant 2 to 11000 at an incost, compare you cancer to 1000 at a real costant or starting		8
	A. Enter 0.01064 of gross receipts (the amount in section 1) **State	_	· ·
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) \(\bigs\)		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here >	_	buse Rute I ce
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) ► \$		
	E. Subtract 4.000 from total DSEs		
	(the figure in section 2) and enter here		
	F. Multiply line D by line E and enter here \$	_	
	G. Add lines A, C, and F. This is your base rate fee.		
	Enter here and in block 3, line 1, space L (page 7)	0.00	
	Base Rate Fee	0.00	
IMPOR	ETANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadca	st signals shall	
instead Space	be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channe G.	l line-ups in	9
	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fees from subscribers located within the station's local service area, from your system's total gross receipts. To take a		Computation
	on, you must:	avantage of this	of Base Rate Fee
First: [Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to	o the same	and
station	or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine	the number of	Syndicated Exclusivity
	and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for : Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.	each group.	Surcharge
NOTE:	If any portion of your cable system is located within the top 100 television market and the station is not exempt in p	oart 7, you must	for Partially
	mpute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B be cable system is wholly located outside all major television markets, complete block A only.	low. However,	Distant Stations, and
	l Identify a Subscriber Group for Partially Distant Stations	tion you	for Partially Permitted
	: For each community served, determine the local service area of each wholly distant and each partially distant stat to that community.	ion you	Stations
outside	For each wholly distant and each partially distant station you carried, determine which of your subscribers were loe the station's local service area. A subscriber located outside the local service area of a station is distant to that state to the station is distant to the subscriber.)		
subscri	Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. ber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note the		
Comp	will have only one subscriber group when the distant stations it carried have local service areas that coincide. uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your systems.	tem's subscriber	
groups In each	a section:		
	fy the communities/areas represented by each subscriber group.		
• Give	the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all bers in the group.	of the	
• If:			
and 4 o	system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in this schedule; or,		
	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in b 6 of this schedule.	lock B,	
• Add t	ne DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
	late gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general in paper SA3 form.	nstructions	
 Comp page. DSEs f 	oute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the plant making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that group's complement of stations and total gross receipts from the subscribers in that group). You do not need	at is, the total	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 007407 CABLE ONE, INC. Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID# 007407	Name
В	LOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU				SUBSCRIBER GRO	UP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<u>.</u>					and
			<u>-</u>					Syndicated Exclusivity
	···		-		•••••		••••	Surcharge
		_						for
		_						Partially
		=	. 					Distant Stations
			<u> </u>					Stations
	<u> </u>		<u>-</u>					
Total DSEs	1	П	0.00	Total DSEs		П	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Gross receipts i list c	лоир	4	0.00	Gross Receipts Sec	ond Group	Ψ	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		_						
			-					
		H						
		_	<u> </u>					
	<u></u>	_	<u>-</u>					
		_						
		_	. 					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				П				
Base Rate Fee: Add to Enter here and in block			riber group	as shown in the boxes	s above.	\$	0.00	
LINGI HEIE AND IN DIOC	. J, IIIIC 1, 3	space L (page 1,				Ψ	3.00	

LEGAL NAME OF OWN CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name		
В				TE FEES FOR EAC						
	FIFTH	SUBSCRIBER GRO			SIXTH SUBSCRIBER GROUP					
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	9 Computation				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
			<u></u>			-		and		
	···		<u></u>			-		Syndicated Exclusivity		
								Surcharge		
								for		
						-		Partially Distant		
	···					-		Stations		
						-				
	···				·····	<u> </u>				
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
·	·				·					
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
	SEVENTH	SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0			
COMMUNITY/ AREA			0	COMMUNITY/ ARE						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
						<u> </u>				
	···					-				
					·····	-				
						<u> </u>				
Total DSEs		II	0.00	Total DSEs			0.00			
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00			
,	•				r	_				
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00			
Base Rate Fee: Add t Enter here and in bloc			scriber group	as shown in the boxe	s above.	\$				

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCE	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		_						and
					<mark>.</mark>			Syndicated
		 						Exclusivity Surcharge
		H				•		for
								Partially
		_						Distant
								Stations
	·····	 						
	·····		···		·····			
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	ELEVENTH	SUBSCRIBER GRO	UP		TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>							
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		H				•		
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	<u></u>		<u></u>		·····			
			···		·····			
		_						
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
C.000 Noocipio milu	Jioup	•	<u> </u>	S. 333 Rescripto i ou	Croup	*	3.30	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	s above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		TI .		SUBSCRIBER GRO		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
			·		····			Syndicated Exclusivity
			-		····			Surcharge
								for
								Partially
					·····			Distant Stations
								Stations
					····			
					····			
Total DSEs	<u> </u>	.!	0.00	Total DSEs		**	0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Gross recorpts i iis	Согоир		0.00	Cross rescipts seed	ona Group		0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		III		SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	A		0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····				····			
					····			
			•		····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	4		
Linter nere and in Di	JON J, IIIIE I, S	space L (page /,				\$		

	SYSTEM ID# ABLE ONE, INC. SYSTEM ID# 007407										
		IBER GROUP	SUBSCRI	TE FEES FOR EACH							
0	Р	SUBSCRIBER GROU	HTEENTH	EIG	JP	SUBSCRIBER GROU	TEENTH	SEVEN			
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA			
Computati		II call closs		0.411.010.41		T 0411 0101	T BOE T				
of Base Rate	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
and	 										
											
Syndicate Exclusivi	<u></u>										
Surcharg		-				T					
for											
Partially	···										
Distant	<u></u>										
Stations	<u></u>	-									
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	0.00			Total DSEs	0.00			otal DSEs			
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr			
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr			
	Р	SUBSCRIBER GROU	VENTIETH	TV	JP	SUBSCRIBER GROU	ITEENTH	NIN			
	<u>0</u>		COMMUNITY/ AREA	0			COMMUNITY/ AREA				
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
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	0.00			Total DSEs	0.00			atal DCCa			
	 -	-						otal DSES			
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Froup	otal DSEs Gross Receipts Third G			

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EACH				
		SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA	0	Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	·····				 			Syndicated Exclusivity
					···			Surcharge
								for
								Partially
		-						Distant Stations
								Stations
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Total DSEs	-	!	0.00	Total DSEs		!!	0.00	İ
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	İ
					этээр	-		İ
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GROU		III		SUBSCRIBER GROU		1
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	İ		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	İ
								1
Base Rate Fee Third	dase Rate Fee Third Group \$ 0.00				h Group	\$	0.00	İ
								1
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		1

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								Name
				ATE FEES FOR EACH				
		SUBSCRIBER GROU		II		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	<u></u>				<u></u>			and
	····							Syndicated Exclusivity
								Surcharge
		-						for
	<u></u>				 			Partially
	<u></u>							Distant Stations
		-						
	<u></u>				<u></u>			
	<u></u>							
	····							
Total DSEs			0.00	Total DSEs		· ·	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
TWENTY	-SEVENTH	SUBSCRIBER GROU	JP	TWEN	TY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
								
				-				
	····				···			
	<u></u>							
	<u></u>							
	<u></u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH				
	TY-NINTH	SUBSCRIBER GROU		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0.122 0.0.1	202	57.122 S. S. T	202	07.22 0.01.	1332	07.22 0.0.1	302	Base Rate Fee
								and
	<u></u>	<u> </u>						Syndicated
				-				Exclusivity
	<u></u>				<u> </u>		····	Surcharge for
	<u></u>	-			<u>-</u>			Partially
								Distant
								Stations
	<mark></mark>							l
	···							l
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Total DSEs			0.00	Total DSEs		-	0.00	İ
Gross Receipts First G	Froup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	1
								l
Base Rate Fee First G		\$	0.00	Base Rate Fee Secon		\$	0.00	İ
	TY-FIRST	SUBSCRIBER GROU		II		SUBSCRIBER GROU		l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	1
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	l
					<u></u>			l
								l
					<u></u>			l
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	<mark></mark>							l
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	···				<u></u>			l
Total DSEs			0.00	Total DSEs			0.00	1
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	İ
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	l
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								Name
				ATE FEES FOR EAC				
	TY-THIRD	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<mark>.</mark>					Base Rate Fee
								and
	···	ļ	······································		·····		<u></u>	Syndicated Exclusivity
								Surcharge
								for
					<u>.</u>			Partially
								Distant Stations
		 	······································					Otations
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	···		<u>-</u>		····			l
Total DSEs			0.00	Total DSEs	<u>!</u>		0.00	1
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	İ
								İ
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	1
	RTY-FIFTH	SUBSCRIBER GRO		III		SUBSCRIBER GROU		1
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······································		0	İ
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	1
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Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	1
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	1
Base Rate Fee: Add t Enter here and in bloo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								Name			
				ATE FEES FOR EACH							
		SUBSCRIBER GROU		TI .		I SUBSCRIBER GROU		9			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of			
								Base Rate Fee			
					<u></u>			and			
								Syndicated Exclusivity			
								Surcharge			
								for			
								Partially			
		-						Distant Stations			
								Stations			
					<u>.</u>						
											
Total DSEs			0.00	Total DSEs		H	0.00				
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00				
Gross receipts i list	Gloup	<u> </u>	0.00	Cross receipts occo	на Огоар	<u>*</u>	0.00				
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00				
		SUBSCRIBER GROU				SUBSCRIBER GROU	JP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA			CALL SIGN DSE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
											
											
		-									
	<u></u>				<u></u>						
											
											
											
							<u> </u>				
Total DSEs			0.00	Total DSEs			0.00				
Gross Receipts Third	I Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00				
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00				
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$					

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								Name
				ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	RTY-FIRST	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
0,122 0.011	202	0,120,011	332	07.122.0.0.1	302	0/122 0.0.1	302	Base Rate Fee
								and
								Syndicated
			.					Exclusivity
	<u></u>		<u>.</u>		 			Surcharge for
	···				<u></u>			Partially
								Distant
		-			<u></u>			Stations
			<u>.</u>		<u></u>			
	<u></u>				<u></u>			
	<u></u>				<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First 0		\$	0.00	Base Rate Fee Seco		\$	0.00	
	RTY-THIRD	SUBSCRIBER GRO		11		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>		<u></u>			
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Total DSEs	1		0.00	Total DSEs	•		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			criber group	o as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								Name
E	BLOCK A: (COMPUTATION O	F BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	RTY-FIFTH	SUBSCRIBER GRO		11		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.122 0.0.1	202	07.122.01.01.1	302	07.122.01011	332	07.22 07.01	302	Base Rate Fee
								and
					<u></u>			Syndicated
				-				Exclusivity
	····				····		····	Surcharge for
	···		···		····			Partially
								Distant
		-			<u></u>			Stations
					<mark></mark>			
	····				····			
					····	•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
FORTY	-SEVENTH	SUBSCRIBER GRO	UP	FOR	RTY-EIGHTH	1 SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····		<mark></mark>		·	-	<u> </u>	
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		-						
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	···		<u></u>		····		····	
					<mark></mark>			
	···		<u></u>					
			<u></u>		····			
Total DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWNI	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								
		COMPUTATION OI SUBSCRIBER GRO		ATE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
								Base Rate Fee	
								and	
								Syndicated Exclusivity	
			·		••••	-		Surcharge	
								for	
						-		Partially	
					·····	-		Distant Stations	
			······································		••••	-	····	Otations	
			······································						
Total DSEs			0.00	Total DSEs	!		0.00		
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
FIF	TY-FIRST	SUBSCRIBER GRO	UP	FIF	TY-SECOND	SUBSCRIBER GRO	UP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
	···	-			·····	-	····		
					<u></u>	-			
						-			
						-			
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	···	-		·	•••••		••••		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00		
	•				•				
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add to			criber group	as shown in the boxe	s above.	-			
Enter here and in bloc	κ ૩, iine 1, :	space L (page /)				\$			

CABLE ONE, INC.	EGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								
				TE FEES FOR EAC					
FIF COMMUNITY/ AREA	I Y-THIRD	SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		SUBSCRIBER GROU	UP 0	9	
	T 505	T 0411 0101	T 505			П оли огол	505	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fee	
						-		and	
								Syndicated	
								Exclusivity	
								Surcharge	
	<u></u>		<u> </u>	-	·····			for Partially	
				·				Distant	
		-						Stations	
	<u> </u>	-							
	<mark></mark>								
					·····				
	···				·····	 			
Total DSEs			0.00	Total DSEs		! !	0.00		
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00		
	TY-FIFTH	SUBSCRIBER GRO		i i		SUBSCRIBER GROU			
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					•••••	-			
		-							
	<u></u>	-	······································		·····				
		-							
	<mark></mark>								
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
	·		·						
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$			

CABLE ONE, INC.	R OF CABL	E SYSTEM:				SY	STEM ID# 007407	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	EVENTH	SUBSCRIBER GROU		11	Y-EIGHTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						_		and
								Syndicated
								Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
							ļ	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
FIFT	Y-NINTH	SUBSCRIBER GROU	P		SIXTIETH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						_		
						H		
							ļ	
	 							
	 				ļ		 	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Raco Data Eng. Add 4L	a haco ===	o fooe for each subset	iher areus	as shown in the haves	phoyo			
Enter here and in block			inei dionb	as shown in the boxes a	iDUVE.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								Name
				ATE FEES FOR EACH			D	
COMMUNITY/ AREA	Y-FIRST	SUBSCRIBER GROU	0	COMMUNITY/ AREA	Y-SECOND	SUBSCRIBER GROU	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate Fee
					-		<u> </u>	and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
		-				_		Distant
								Stations
		-						
							<u> </u>	
							<u> </u>	
Total DSEs	 		0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secor	d Group	\$	0.00	
								
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
SIXT	Y-THIRD	SUBSCRIBER GROU	JP	SIXT	Y-FOURTH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
					·-		<u> </u>	
					·		<u> </u>	
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add the			riber group	as shown in the boxes	above.			
Enter here and in block	s, line 1, s	space L (page /)				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								Name
				ATE FEES FOR EACH				
S COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	III		I SUBSCRIBER GROU	JP 0	9
COMMUNITY AREA			U	COMMUNITY/ AREA			U	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and Syndicated
					···			Exclusivity
								Surcharge
		<u> </u>						for
					····			Partially Distant
		-						Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SIXTY	/-SEVENTH	SUBSCRIBER GROU	JP	SIX	TY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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		-						
					······································			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
2.300 . 1000ipto 11iii 0	- 3.00p	· ·			. С. Сир	·*		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								Name
				ATE FEES FOR EAC				
S COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		1 SUBSCRIBER GRO	UP 0	9
COMMUNITY AREA			U	COMMUNITY AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and Syndicated
			•					Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
				-	•••••••••••••••••••••••••••••••••••••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO		11		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			-		·····			
					····	-		
	·····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name
				TE FEES FOR EAC				
		SUBSCRIBER GRO		II		I SUBSCRIBER GROU		9
COMMUNITY/ AREA	······································		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>			and
					<u></u>			Syndicated Exclusivity
				-				Surcharge
								for
					<u></u>			Partially
								Distant Stations
					<u></u>			Stations
					 			
Total DSEs	<u> </u>	.!	0.00	Total DSEs		**	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Cross receipts rinst	Стоир		0.00	Cross receipts eco	на Стоар	*	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GRO		ii —		SUBSCRIBER GROU	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
				-				
					<u></u>			
								
								
								
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EACH				
SEVENTY COMMUNITY/ AREA		SUBSCRIBER GRO	JP 0	SEVEN COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	9
O O WIN O WY T T T T WEEK				CONNICION 1777 (CEA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
	····							Syndicated
								Exclusivity
	<u></u>				<u></u>			Surcharge
								for Partially
								Distant
								Stations
	<u></u>				<u></u>			
	····				···			
	<u></u>				<u></u>			
T. / I DOE			0.00	T / 1 POF			0.00	
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
		SUBSCRIBER GRO		ii .		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>							
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	<u></u>				<u></u>			
								
		-						
	····			-				
	<u></u>				<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EACH				
	ITY-FIRST	SUBSCRIBER GROU		III	Y-SECONE	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>			and
								Syndicated Exclusivity
	···				-	- 		Surcharge
								for
								Partially
					<u></u>			Distant Stations
					<u> </u>			Stations
					<u></u>			
			ļ		<u></u>			
	···				<u> </u>			
Total DSEs		Į.	0.00	Total DSEs		!!	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GROU		ii -	Y-FOURTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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					<u></u>			
	···				<u> </u>			
	···				-	 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EAC				
EIG COMMUNITY/ AREA		SUBSCRIBER GRO	UP 0	COMMUNITY/ AREA		1 SUBSCRIBER GRO	UP 0	9
COMMUNITY AREA			U	COMMUNITY AREA	······································			Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					·····			and Syndicated
			·		·····			Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		III		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.</u>					
			-					
						_		
		-						
Total DSEs			0.00	Total DSEs		I	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EACH				
EIGH COMMUNITY/ AREA	ITY-NINTH	SUBSCRIBER GROU	JP 0	COMMUNITY/ AREA		I SUBSCRIBER GROU	JP 0	9
COMMONT I/ AREA				COMMONT IT AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
					<u></u>			Base Rate Fee
				-	···			and Syndicated
		-						Exclusivity
								Surcharge
								for Partially
					•••			Distant
								Stations
		-						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	ETY-FIRST	SUBSCRIBER GROU		III		SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
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	<u></u>							
	···				······································			
Total DSEs			0.00	Total DSEs		П	0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourtl	h Group	\$	0.00	
	•				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007407	Name
				TE FEES FOR EACH				
COMMUNITY/ AREA		SUBSCRIBER GROU	JP 0	III		I SUBSCRIBER GRO	JP 0	9
COMMUNITY AREA	·············		U	COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and Syndicated
					···			Exclusivity
								Surcharge
								for
					···			Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
NIN	NETY-FIFTH	SUBSCRIBER GROU	JP	NIN	ETY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
					····			
					······································			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
							<u> </u>	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00	
Base Rate Fee: Add	the base rat	e fees for each subsc	riber aroun	as shown in the boxes	above			
Enter here and in blo			J 3P			\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EAC				
	SEVENTH	SUBSCRIBER GRO		†		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<mark>.</mark>					Base Rate Fee
								and
	···		······································		<u></u>			Syndicated Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
			<u>-</u>					
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								l
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	···		<u>-</u>					l
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	İ
								İ
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	TY-NINTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		1
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	İ
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	İ
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								l
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	···		<u>-</u>					l
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	···		<u> </u>					l
								l
								l
Total DSEs		_	0.00	Total DSEs			0.00	İ
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	l
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	l
Base Rate Fee: Add t Enter here and in bloc			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EACH				
ONE HUNDR	RED FIRST	SUBSCRIBER GROU		III		SUBSCRIBER GROU		9
COMMUNITY AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	···			-				and Syndicated
								Exclusivity
								Surcharge
								for Partially
					···			Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDR	ED THIRD	SUBSCRIBER GROU	JP	ONE HUNDRE	D FOURTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
					<u></u>			
	···							
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
					-			
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 007407	Name
В	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCF	RIBER GROUP		
	ED FIFTH	SUBSCRIBER GRO		Ħ		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	······		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			<u>. </u>		····			Exclusivity Surcharge
	···	-	<u> </u>		·····			for
		-						Partially
								Distant
	<u></u>		<u> </u>					Stations
								l
			<u> </u>		····			l
	<u></u>	-	······································		••••			l
								l
								l
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	1
								l
Base Rate Fee First G		\$	0.00	Base Rate Fee Seco		\$	0.00	
	SEVENTH	SUBSCRIBER GRO		11		I SUBSCRIBER GROU	_	l
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	İ
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	l
								l
	<u></u>		<u> </u>				<u> </u>	l
	<u> </u>		······································		····			l
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	<u></u>							l
	<u> </u>				····			l
Total DSEs			0.00	Total DSEs			0.00	İ
Gross Receipts Third 0	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	1
								İ
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	İ
Base Rate Fee: Add th			criber group	as shown in the boxes	s above.			
Enter here and in block	k 3, line 1, s	space L (page 7)				\$		ı

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 007407	Name
В	LOCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDR	ED NINTH	SUBSCRIBER GRO	UP	ONE HUND	RED TENTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-				-		and
						 		Syndicated
							<u></u>	Exclusivity Surcharge
	···	-	·		·····	-	<u> </u>	for
						-		Partially
								Distant
								Stations
		-						
							<u> </u>	
							<u> </u>	
					·····			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED E	LEVENTH	SUBSCRIBER GRO	UP	ONE HUNDRE	D TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u>.</u>	-		
	···					-		
						-	<u></u>	
			•			-	<u> </u>	
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							<u> </u>	
	•••••••••••••••••••••••••••••••••••••••					1		
Total DSEs	1		0.00	Total DSEs	1		0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	s above.	\$		

CABLE ONE, INC.		E SYSTEM:				S	YSTEM ID# 007407	Name
				TE FEES FOR EACH				
ONE HUNDRED THIS	RTEENTH	SUBSCRIBER GROL		II		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>			and
								Syndicated Exclusivity
				-	-			Surcharge
								for
								Partially
					<u></u>			Distant Stations
					<u> </u>			Stations
					<u> </u>			
					<u></u>			
					<u> </u>			
Total DSEs	1		0.00	Total DSEs		!!	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
	·				·			
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	FTEENTH	SUBSCRIBER GROU		ii .	SIXTEENTH	I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					. 			
					<u></u>			
					<u></u>			
					<u></u>			
					. 			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourti	n Group	\$	0.00	
	r	i.	2.00			<u>L</u> *		
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007407	Name
				TE FEES FOR EACH				
ONE HUNDRED SEVE	NTEENTH	SUBSCRIBER GROU		ii —		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<u></u>			Syndicated Exclusivity
					-			Surcharge
								for
					<u></u>			Partially
					<u></u>			Distant Stations
					<u></u>			Stations
								I
								I
					<u></u>			I
	···				<u> </u>			
Total DSEs		!	0.00	Total DSEs		11	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
·	·				·			
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	NTEENTH	SUBSCRIBER GROU		ii .	WENTIETH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···				. 			
					<u></u>			
	···				<u></u>			
					<u></u>	-		I
	···				. 			I
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
	~~p	<u>L</u> *	3.00		. С.оцр	<u> *</u>	0.00	
Base Rate Fee: Add to Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROU		TI .		SUBSCRIBER GROUP		9
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-						Syndicated
							<u> </u>	Exclusivity Surcharge
					<u></u>			for
		-						Partially
								Distant
								Stations
		-			<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TW	/ENTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED TWEN	NTY-FOURTH	SUBSCRIBER GROUF)	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u> </u>	
		-						
					<u></u>		<u></u>	
		-						
					<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	:h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, IN		E SYSTEM:				S	YSTEM ID# 007407	Name
		COMPUTATION OF SUBSCRIBER GROUP		ATE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROUF	,	
COMMUNITY/ AREA		SUBSCRIBER GROUP	0	COMMUNITY/ AREA		1 SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIGIT	DOL	OALL GIGIT	DOL	OALL GIGIT	DOL	OALL GIGIN	DOL	Base Rate Fee
								and
								Syndicated
	·····							Exclusivity
								Surcharge for
								Partially
								Distant
					<u></u>			Stations
				·				
		-			<u></u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
NE HUNDRED TWEN	TY-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED TWE	NTY-EIGHTH	I SUBSCRIBER GROUP)	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	 		<u></u>			
								
					<u></u>			
								
		-			<u></u>			
		-						
		-						
								
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name
	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EACH	H SUBSCF	RIBER GROUP		
		SUBSCRIBER GROUP		TI .		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
	<mark></mark>				<u></u>			Syndicated
				-				Exclusivity Surcharge
					···			for
								Partially
								Distant
								Stations
	····				···			
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TH	HIRTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED THIR	TY-SECONI	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					 			
					<u></u>			
								
								
					···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC.		LE SYSTEM:				S	YSTEM ID# 007407	Name
BI	LOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED THIS	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED THI	RTY-FOURTH	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
	. <mark>.</mark>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED THI	RTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED T	HIRTY-SIXTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
							····	
				-	·····	-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EAC				
ONE HUNDRED THIR		SUBSCRIBER GROUF	0	TI .		H SUBSCRIBER GROUF	0	9
COMMUNITY/ AREA				COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
	·····							and Syndicated
					····			Exclusivity
								Surcharge
							<u></u>	for Partially
								Distant
								Stations
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
		SUBSCRIBER GROUP		iii —		SUBSCRIBER GRO	UP	
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
				-				
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name
	BLOCK A: (COMPUTATION OF	BASE RA	ATE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FO	RTY-FIRST	SUBSCRIBER GROUP)	ONE HUNDRED FO	RTY-SECOND	SUBSCRIBER GROUP)	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			-					Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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						-		
	•••••••••••••••••••••••••••••••••••••••				•••••			
	•••••••••••							
	••••••••••				•••••			
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t			criber group	as shown in the boxe	s above.	\$		

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GROUP		TI .		H SUBSCRIBER GROUP		9
COMMUNITY/ AREA	······································		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
					••••		····	Exclusivity Surcharge
					••••			for
								Partially
								Distant
								Stations
						•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FOR	TY-SEVENTH	SUBSCRIBER GROUF)	ONE HUNDRED FO	RTY-EIGHTI	H SUBSCRIBER GROUF)	
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>	-	·····			
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		-						
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Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Fourt	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group	as shown in the boxes	s above.	\$		

CABLE ONE, IN		LE SYSTEM:				S	YSTEM ID# 007407	Name
				ATE FEES FOR EAC				
		SUBSCRIBER GRO		II		SUBSCRIBER GRO		9
COMMUNITY/ ARE	Α		0	COMMUNITY/ AREA	······		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<mark></mark>			and
	·····							Syndicated Exclusivity
			-					Surcharge
								for
					<mark></mark>			Partially
				-				Distant Stations
					••••			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Firs	t Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
ONE HUNDRED F	FIFTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED FIF	TY-SECONE	SUBSCRIBER GRO	UP	
COMMUNITY/ ARE.	Α		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	·····				····			
			-					1
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				·	····	•		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
			criber group	as shown in the boxes	s above.			
Enter here and in blo	OUR O, IIIIE I, S	space L (page 1,				\$		I

CABLE ONE, INC		LE SYSTEM:				S	YSTEM ID# 007407	Name
				TE FEES FOR EACH				
	TY-THIRD	SUBSCRIBER GROU		ONE HUNDRED FIFT		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
		-						Base Rate Fee
	<u></u>				<u></u>			and
								Syndicated Exclusivity
	<u></u>				···			Surcharge
								for
		-						Partially
	<mark></mark>				 			Distant Stations
	<u> </u>							Stations
	<u></u>							
	<u></u>							
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Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
					этээр			
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	TY-FIFTH	SUBSCRIBER GROU		II		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<mark></mark>				 			
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	<u></u>							
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	<u> </u>							
	<u></u>				···			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (Group	\$	0.00	Gross Receipts Fourth	h Group	\$	0.00	
Base Rate Fee Third (Group	\$	0.00	Base Rate Fee Fourti	h Group	\$	0.00	
				ш				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

CABLE ONE, INC		E SYSTEM:				S	YSTEM ID# 007407	Name
				TE FEES FOR EACH				
		SUBSCRIBER GROUP		ii e		SUBSCRIBER GROUP		9
COMMUNITY/ AREA	٠		0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-	 		<u> </u>			and
					<u></u>			Syndicated Exclusivity
								Surcharge
			 		<u> </u>			for
	·····				<u>-</u>			Partially Distant
		-			-			Stations
					<u></u>			
					<u> </u>			
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED	FIFTY-NINTH	SUBSCRIBER GROUP		ONE HUNDRE	D SIXTIETH	SUBSCRIBER GROUF)	
COMMUNITY/ AREA	4		0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
				-	<u></u>			
					<u></u>			
			 		<u></u>			
	·····				<u>-</u>			
			 		<u> </u>			
Total DSEs			0.00	Total DSEs		II	0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
	r			l sur l sur l sur l		<u>·</u>		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth	ı Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN CABLE ONE, INC		LE SYSTEM:	•			S	YSTEM ID# 007407	Name
В				TE FEES FOR EAC				
	FIRST	SUBSCRIBER GRO		 		SUBSCRIBER GRO		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA				Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
			<u></u>				<u></u>	and
		-	<mark></mark>		<u></u>	.		Syndicated Exclusivity
			-					Surcharge
······		-						for
								Partially
			<u> </u>					Distant
							<u></u>	Stations
	···		. 		 		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>					
			<u> </u>					
	···		<u>-</u>		····		····	
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add t	he base rat	re fees for each subs	criber group	as shown in the boxes	s above.			
Enter here and in bloc			J. 5.55P	2 1 1 1 1 1 2 2 A A A A		\$	0.00	

Name	YSTEM ID# 007407	S'			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.
				TE FEES FOR EACH				BL
9	JP 0	SUBSCRIBER GROU	SIXTH	COMMUNITY/ ADEA		SUBSCRIBER GRO	FIFTH	COMMUNITY/ ADE A
Computatio				COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fo								
and								
Syndicated Exclusivity		-					···	
Surcharge								
for								
Partially								
Distant Stations								
Otations								
							-	
		 						
	0.00	<u> </u>	<u> </u>	Total DSEs	0.00		1	Total DSEs
		_	Total DSEs		_	0.00		
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	S
	0	0 COMMUNITY/ AREA				COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		-						
	<u></u>						·	
		-						
		-						
	<u></u>						<u> </u>	
	<u> </u>						-	
	<u></u>	<u> </u>					·	
		<u> </u>						
				Total DSEs	0.00			Total DSEs
	0.00							
	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
	_	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

7 Name								
	IID	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GROU		В
	0	- COBCONIDENCINO		COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computati	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate I	DOL	CALL SIGN	DOL	CALL SIGIV	DOL	CALL SIGN	DOL	CALL SIGN
and								
Syndicate								
Exclusivit								
Surcharg		-						
for	<u></u>					-	<u></u>	
Partially Distant								
Stations	•••••	-						
						-		
							<u></u>	
_	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Gross Receipts Second Group \$			\$	Group	ross Receipts First G
- -								
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	ase Rate Fee First G
		\$ SUBSCRIBER GROU		Base Rate Fee Secon		\$ SUBSCRIBER GROU		
	1			Base Rate Fee Secon COMMUNITY/ AREA				E
] =]]	UP				JP			E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	UP 0	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	LEVENTH	E OMMUNITY/ AREA
	DSE	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	LEVENTH	CALL SIGN
	DSE DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	CALL SIGN CALL SIGN Otal DSEs
	DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	CALL SIGN CALL SIGN Otal DSEs
	DSE DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE	COMMUNITY/ AREA

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
9		SUBSCRIBER GROU	RTEENTH			SUBSCRIBER GRO	RTEENTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and				•••••					
Syndicated									
Exclusivity							·		
Surcharge for									
Partially									
Distant									
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	0.00		Total DSEs		0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	JP	SUBSCRIBER GROU	XTEENTH	S	JP	SUBSCRIBER GRO	TEENTH	FIF	
					0			COMMUNITY/ AREA	
-	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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					0.00			T-4-1 DOF-	
	0.00								
	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G	

Name	YSTEM ID# 007407	S			•	LE SYSTEM:		LEGAL NAME OF OWNER CABLE ONE, INC.
				TE FEES FOR EACH				
9	JP	SUBSCRIBER GROU	HTEENTH			SUBSCRIBER GRO	NTEENTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity Surcharge		-			<u>-</u>	 		
for		-			·			
Partially	<u></u>	-				-		
Distant								
Stations								
					<u> </u>			
					<u> </u>			
	<mark></mark>				 			
			<u> </u>					
	0.00		Total DSEs		0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	VENTIETH	T\	UP	SUBSCRIBER GRO	NTEENTH	NIN
				0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
				•••••				
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
		RIBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION O	OCK A: (Bl	
9	JP	SUBSCRIBER GROU	'-SECOND	TWENT		SUBSCRIBER GRO	TY-FIRST	TWEN	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe		<u> </u>							
and									
Syndicated									
Exclusivity									
Surcharge						-	·		
for Partially		-							
Distant					······································		·		
Stations		-					-		
0.00.00							<u>'</u>		
	0.00		Total DSEs		0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G	
	JP	SUBSCRIBER GROU	/-FOURTH	TWENT	UP	SUBSCRIBER GRO	ry-third	TWEN	
	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA	
				COMMONT IT THE					
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
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	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN	
	DSE	CALL SIGN	DSE		DSE	CALL SIGN	DSE		
		CALL SIGN		CALL SIGN		CALL SIGN		Total DSEs Gross Receipts Third C	

Name	YSTEM ID# 007407	S			•	LE SYSTEM:		LEGAL NAME OF OWNE CABLE ONE, INC.	
				TE FEES FOR EACH					
9	JP	SUBSCRIBER GROU	TY-SIXTH			SUBSCRIBER GRO	TY-FIFTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and									
Syndicated									
Exclusivity Surcharge		-					·		
for		-					·		
Partially	<u></u>	-				-	·		
Distant									
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	0.00		Total DSEs		_	0.00		Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr	
	JP	SUBSCRIBER GROU	Y-EIGHTH	TWENT	JP	SUBSCRIBER GRO	SEVENTH	TWENTY-S	
	TWENTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
	<u></u>	-				_			
	<u> </u>						····		
							·		
	<u> </u>								
								Total DSEs	
	0.00			Total DSEs	0.00			TOTAL DOES	
	-		Group			s	Proup		
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G	

LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	E SYSTEM:				S	007407	Name
				TE FEES FOR EAC				
	Y-NINTH	SUBSCRIBER GRO	UP			H SUBSCRIBER GRO	UP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALL GIGIN	DOL	OALL GIGIT	DOL	OALL GIGIT	DOL	CALL GIGIT	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
		-						for
								Partially
		-			·····			Distant Stations
			····					Stations
			···		·····			
			<u></u>			-		
	1							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THIR1	Y-FIRST	SUBSCRIBER GRO	UP	THIR	TY-SECONI	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<u></u>					
		-						
		-						
		-						
								
Total DSEs	<u>. </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxe	s above.	\$		

O Computation OF Base Rate Fee and Syndicated	IBER GROUP SUBSCRIBER GROUP		TE FEES FOR EACH	BASE RA	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
Computation DSE of Base Rate Fee and	SUBSCRIBER GROUP	/ FOLIDTH										
Computation DSE of Base Rate Fee and		-FUURIH	THIRTY		SUBSCRIBER GROU	ry-third	THIR					
Base Rate Fee			COMMUNITY/ AREA	0			COMMUNITY/ AREA					
and		DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN					
Syndicated					-							
Exclusivity Surcharge						<u>-</u>						
for					-	·						
Partially												
Distant												
Stations												
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						<mark>.</mark>						
		ļ										
0.00	0.	Total DSEs		0.00			Total DSEs					
0.00	\$ 0.	d Group	Gross Receipts Second	0.00	\$	roup	Gross Receipts First G					
0.00	\$ 0.	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First G					
	SUBSCRIBER GROUP	RTY-SIXTH	THIR	JP	SUBSCRIBER GROU	TY-FIFTH	THIR					
0							COMMUNITY/ AREA					
DSE	CALL SIGN D	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN					
	-					<mark>-</mark>						
	H					·						
0.00	0.		Total DSEs	0.00			Total DSEs					
0.00	\$ 0.	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G					
0.00	\$ 0.	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G					

	ID			TE FEES FOR EACH				
9)P	SUBSCRIBER GROU	I-EIGHIH	COMMUNITY/ AREA)P 0	SUBSCRIBER GROU	SEVENIA	COMMUNITY/ AREA
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	JP 0	SUBSCRIBER GROU	FORTIETH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-NINTH	THIR
	JP 0	SUBSCRIBER GROU	FORTIETH	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-NINTH	THIR
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LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								Name
	TY-FIRST	SUBSCRIBER GRO			Y-SECOND	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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		-						and
								Syndicated
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Total DSEs	<u> </u>		0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Second Group \$		\$	0.00	
							1	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
FORT	Y-THIRD	SUBSCRIBER GRO	UP	FORT				
COMMUNITY/ AREA			0	COMMUNITY/ AREA	MMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	1		0.00	Total DSEs	1		0.00	
Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		e fees for each subs	criber group	as shown in the boxes	above.	\$		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
9	JP	SUBSCRIBER GROU	RTY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
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		1	<u> </u>					
	0.00	-	Total DSEs		0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	SUBSCRIBER GROU	Y-EIGHTH	FORT	UP	SUBSCRIBER GRO	SEVENTH	FORTY-S
	0			COMMUNITY/ AREA	0	0		COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		\$				CALL SIGN		

9		LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
9				TE FEES FOR EACH					
J -		SUBSCRIBER GROU	FIFTIETH			SUBSCRIBER GRO	TY-NINTH		
Computatio	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
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_	0.00		Total DSEs		0.00	0.00		Total DSEs	
_	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G	
	UP	SUBSCRIBER GROU	-SECOND	FIFT	JP	SUBSCRIBER GRO	TY-FIRST	FIF	
0					0			COMMUNITY/ AREA	
····	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSEs	
_	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G	
7	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	Group	Base Rate Fee Third G	

N OF BASE RA GROUP 0 DSE	COMMUNITY/ ARE	TY-FOURTH	RIBER GROUP I SUBSCRIBER GROU	UP 0	9
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0.00	Total DSEs			0.00	
0.00	Gross Receipts Sec	ond Group	\$	0.00	
0.00	Base Rate Fee Sec	ond Group	\$	0.00	
GROUP	İ		I SUBSCRIBER GROU	JP	
0	COMMUNITY/ AREA 0				
DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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0.00	Total DSEs			0.00	
0.00	Gross Receipts Fou	rth Group	\$	0.00	
0.00	Base Rate Fee Fou	rth Group	\$	0.00	
	0.00 GROUP DSE 0.00	0.00 Gross Receipts Sec	0.00 Gross Receipts Second Group 0.00 Base Rate Fee Second Group GROUP FIFTY-SIXTH COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE 0.00 Total DSEs	0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ GROUP FIFTY-SIXTH SUBSCRIBER GROUD COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN O.00 Total DSEs	0.00 Gross Receipts Second Group \$ 0.00

	EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# CABLE ONE, INC. 007407							
	-			TE FEES FOR EACH				
0	JP	SUBSCRIBER GROU	Y-EIGHTH	FIFT		SUBSCRIBER GRO	SEVENTH	FIFTY-S
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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-	0.00			Total DSEs	0.00			Total DSEs
-	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	SIXTIETH		JP	SUBSCRIBER GRO	TY-NINTH	FIFT
	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
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	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. SYSTEM ID# 007407							
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GRO	TY-FIRST	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Base Rate Fe								
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
_	JP	SUBSCRIBER GROU	'-FOURTH		JP	SUBSCRIBER GRO	ry-THIRD	SIXT
	COMMUNITY/ AREA 0				0			COMMUNITY/ AREA
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G
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Name	EGAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. SYSTEM ID# 007407							
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	(TY-SIXTH	İ		SUBSCRIBER GRO	TY-FIFTH	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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Syndicated Exclusivity					<u></u>		·	
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	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	JP	I SUBSCRIBER GROU	Y-EIGHTH	SIX	UP	SUBSCRIBER GRO	SEVENTH	SIXTY-
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourt	0.00	\$	Group	Total DSEs Gross Receipts Third (

	NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# LE ONE, INC. 007407							
				TE FEES FOR EACH				
9	UP	SUBSCRIBER GROU	VENTIETH	SE		SUBSCRIBER GRO	TY-NINTH	SIX
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	UP	SUBSCRIBER GROU	/-SECOND	SEVENT	UP	SUBSCRIBER GRO	ITY-FIRST	SEVEN
	UP 0	SUBSCRIBER GROU	/-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GRO	ITY-FIRST	
		SUBSCRIBER GROU	/-SECOND			SUBSCRIBER GRO	ITY-FIRST	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	ID			TE FEES FOR EACH				
9)P 0	SUBSCRIBER GROU	r-FOURTH	COMMUNITY/ AREA	0	SUBSCRIBER GRO	ı Y-IHIKD	SEVEN COMMUNITY/ AREA
Computat				COMMONT IT AREA				SOMMONT IT AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			otal DSEs
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	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	Group	Base Rate Fee First G
	JP	SUBSCRIBER GROU	NTY-SIXTH	SEVEN	JP	SUBSCRIBER GRO	NTY-FIFTH	SEVEN
	COMMUNITY/ AREA 0				0			OMMUNITY/ AREA
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	0.00			Total DSEs	0.00			Fotal DSEs
		S	Group			<u> </u>	Group	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs Gross Receipts Third (

LEGAL NAME OF OWNER CABLE ONE, INC.	NAME OF OWNER OF CABLE SYSTEM: LE ONE, INC. SYSTEM ID# 007407							
				TE FEES FOR EACH				
SEVENTY-S	EVENTH	SUBSCRIBER GRO		SEVEN	TY-EIGHTH	I SUBSCRIBER GROU	JP	٥
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
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Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SEVENT	Y-NINTH	SUBSCRIBER GRO	UP		EIGHTIETH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
e I	base rat			Base Rate Fee Fourt		\$	0.00	

Name	YSTEM ID# 007407	DF CABLE SYSTEM: SYSTEM ID: 00740							
				TE FEES FOR EACH					
9	JP	SUBSCRIBER GROU	/-SECOND			SUBSCRIBER GRO	TY-FIRST		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe							<mark>.</mark>		
and		-							
Syndicated Exclusivity		-					<u> </u>		
Surcharge	<u></u>	-					<u>.</u>		
for	····	-					<u>-</u>		
Partially		-							
Distant									
Stations		-							
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	0.00	<u> </u>	<u> </u>	Total DSEs	0.00		-	Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
									
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	JP	SUBSCRIBER GROU	/-FOURTH	EIGHT	JP	SUBSCRIBER GRO	TY-THIRD	EIGH1	
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA		
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	
	-	\$	Group			\$	Group		

Name	O07407	OF OWNER OF CABLE SYSTEM: NE, INC. SYSTEM ID# 007407							
				TE FEES FOR EACH					
9		SUBSCRIBER GROU	ITY-SIXTH			SUBSCRIBER GRO	TY-FIFTH		
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate Fe									
and									
Syndicated Exclusivity							·		
Surcharge		-							
for	····								
Partially									
Distant									
Stations									
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	0.00		ļ	Total DSEs	0.00			Total DSEs	
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr	
	IP	SUBSCRIBER GROU	Y-EIGHTH	EIGHT	JP	SUBSCRIBER GRO	SEVENTH	EIGHTY-S	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
				•••••					
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	0.00			Total DSEs	0.00			Total DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G	

	007407 A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP							
	IP	IBER GROUP SUBSCRIBER GROU				COMPUTATION OF SUBSCRIBER GROUND		
9	0	- SSSSTABLA GROC		COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computati of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	DOL	OALL GIGIN	DOL	GALL GIGIN	DOL	OALL GIGIN	DOL	OALL GIGIN
and								
Syndicate								
Exclusivi								
Surcharg								
for				•••••			<mark></mark>	
Partially Distant	<u></u>						<u></u>	
Stations	<u></u>						···	
Otations	<u></u>						···	
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	ross Receipts First G
		<u>*</u>						
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	iroup	ase Rate Fee First G
	JP	SUBSCRIBER GROU	-SECOND	NINETY	JP	SUBSCRIBER GRO	TY-FIRST	NINE
	COMMUNITY/ AREA 0				0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			otal DSEs
		- s	Group		,	s	Group	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	otal DSEs ross Receipts Third (

Name	EGAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. SYSTEM ID# 007407							
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: C	BL
9		SUBSCRIBER GROU	'-FOURTH			SUBSCRIBER GRO	ry-third	
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated	<u></u>					-		
Exclusivity Surcharge	···-							
for	<u></u>	-					·	
Partially								
Distant								
Stations							<mark>.</mark>	
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	0.00			Total DSEs	0.00		-	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	TY-SIXTH	NINE	JP	SUBSCRIBER GRO	TY-FIFTH	NINE
	0		COMMUNITY/ AREA	0			COMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

LEGAL NAME OF OWNE CABLE ONE, INC.	GAL NAME OF OWNER OF CABLE SYSTEM: ABLE ONE, INC. SYSTEM ID# 007407							
BL	OCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
NINETY-S	EVENTH	SUBSCRIBER GRO	UP	NIN	ETY-EIGHTH	SUBSCRIBER GRO	UP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
			<u></u>		·····			Distant
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	·····							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINET	Y-NINTH	SUBSCRIBER GRO)UP	ONE I	HUNDREDTH	I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-	<u></u>					
	 							
	 							
	 							
	····		···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE		LE SYSTEM:				S	YSTEM ID# 007407	Name
BI	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCR	RIBER GROUP		
ONE HUNDR	ED FIRST	SUBSCRIBER GRO	UP	ONE HUNDRE	D SECOND	SUBSCRIBER GROU	UP	Δ
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
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Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRE	ED THIRD	SUBSCRIBER GRO	UP	ONE HUNDRE	D FOURTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	1		0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
	\$ e fees for each su	ubse	0.00	Gross Receipts Fourt Base Rate Fee Fourt	h Group	\$ \$	0.00	

LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S'	YSTEM ID# 007407	Name
				TE FEES FOR EACH				
ONE HUNDRE	D FIFTH	SUBSCRIBER GRO	JP	ONE HUNDF	RED SIXTH	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
						<u> </u>		Exclusivity
		-				<u> </u>		Surcharge
						-		for
			<u>.</u>			.		Partially
			 		<u> </u>		<u> </u>	Distant
								Stations
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Total DSEs	<u> </u>		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED S	EVENTH	SUBSCRIBER GRO	JP	ONE HUNDRE	D EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs	<u> </u>		0.00	Total DSEs	1		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		e fees for each subso	criber group	as shown in the boxes a	above.	\$		

	007407	S'				LE SYSTEM:		CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (ВІ
•	UP	SUBSCRIBER GROU	ED TENTH	ONE HUNDR	JP	SUBSCRIBER GROU	ED NINTH	ONE HUNDRE
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity								
Surcharge								
for								
Partially								
Distant								
Stations								
	0.00			Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Froun	Base Rate Fee First G
	0.00		u Group		'	L	лоир	
	•	SUBSCRIBER GROU			JP	SUBSCRIBER GROU		ONE HUNDRED E
	•	SUBSCRIBER GROU			UP 0			
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP	SUBSCRIBER GROU		ONE HUNDRED				
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	UP 0		TWELVTH	ONE HUNDRED	0	SUBSCRIBER GROU	LEVENTH	COMMUNITY/ AREA
	DSE		DSE	ONE HUNDRED COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE	CALL SIGN

	YSTEM ID# 007407	S			•	LE SYSTEM:		LEGAL NAME OF OWNER CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: 0	BL
0	JP	SUBSCRIBER GROU	RTEENTH	ONE HUNDRED FOL	JP	SUBSCRIBER GRO	RTEENTH	ONE HUNDRED THIR
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
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Syndicated								
Exclusivity								
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Distant					·····		<mark>-</mark>	
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	0.00			Total DSEs	0.00		 	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
1	JP	SUBSCRIBER GROU	IXTEENTH	ONE HUNDRED S	JP	SUBSCRIBER GRO	TEENTH	ONE HUNDRED FIF
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	0.00			Total DSFs	0.00			Total DSFs
	0.00		0	Total DSEs	0.00			
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Total DSEs Gross Receipts Third G

	007407	S				LE SYSTEM:		CABLE ONE, INC.
		IBER GROUP	SUBSCR	TE FEES FOR EACH				
	1	SUBSCRIBER GROUP	GHTEENTH	ONE HUNDRED E)	SUBSCRIBER GROUP	NTEENTH	ONE HUNDRED SEVE
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe								
and								
Syndicated								
Exclusivity								
Surcharge								
for					.			
Partially							·	
Distant	<u></u>					-	·	
Stations	<u></u>						·	
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	0.00			Total DSEs	0.00		 	Total DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	*	\$ SUBSCRIBER GROU				SUBSCRIBER GROU		
-	*							ONE HUNDRED NIN
	JP			ONE HUNDRED T	JP			ONE HUNDRED NIN COMMUNITY/ AREA CALL SIGN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0	SUBSCRIBER GROU	VENTIETH	ONE HUNDRED TO	JP 0	SUBSCRIBER GROU	NTEENTH	ONE HUNDRED NIN
	JP 0 DSE	SUBSCRIBER GROU	DSE	ONE HUNDRED TO COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	DSE	ONE HUNDRED NIN

Name	007407						·	CABLE ONE, INC.
		IBER GROUP	SUBSCRI	TE FEES FOR EACH	BASE RA	COMPUTATION OF	LOCK A: (BL
0		SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED TWEN)	SUBSCRIBER GROUP	NTY-FIRST	ONE HUNDRED TWEN
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00	SUBSCRIBER GROUP						Base Rate Fee First G
	0.00							ONE HUNDRED TWEN
	0	SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED TWEN COMMUNITY/ AREA	0	SUBSCRIBER GROUF	NTY-THIRD	ONE HUNDRED TWEN
				ONE HUNDRED TWEN)			ONE HUNDRED TWEN
	0	SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED TWEN COMMUNITY/ AREA	0	SUBSCRIBER GROUF	NTY-THIRD	ONE HUNDRED TWEN
	0	SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED TWEN COMMUNITY/ AREA	0	SUBSCRIBER GROUF	NTY-THIRD	ONE HUNDRED TWEN
	0	SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED TWEN COMMUNITY/ AREA	0	SUBSCRIBER GROUF	NTY-THIRD	ONE HUNDRED TWEN
	0	SUBSCRIBER GROUP	Y-FOURTH	ONE HUNDRED TWEN COMMUNITY/ AREA	0	SUBSCRIBER GROUF	NTY-THIRD	ONE HUNDRED TWEN
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LEGAL NAME OF OWNER CABLE ONE, INC.	R OF CABI	LE SYSTEM:				S	YSTEM ID# 007407	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED TWEN	TY-FIFTH	SUBSCRIBER GROUP		H	NTY-SIXTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NE HUNDRED TWENTY-	SEVENTH	SUBSCRIBER GROUP	1	ONE HUNDRED TWEN	TY-EIGHTH	SUBSCRIBER GROUP	1	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Total DSEs			0.00	Total DSEs			0.00	
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Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	

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		IBER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL
0		SUBSCRIBER GROUP	TY-EIGHTH			SUBSCRIBER GROUP	-SEVENTH	ONE HUNDRED THIRTY-
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LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007407	Name
BL	OCK A: (COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FOR	RTY-FIRST	SUBSCRIBER GROUP)	ONE HUNDRED FOR	TY-SECOND	SUBSCRIBER GROUP		^
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
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Total DSEs	 		0.00	Total DSEs	<u> </u>		0.00	
Gross Receipts First Gr	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED FOR	TY-THIRD	SUBSCRIBER GROUP)	ONE HUNDRED FOR	TY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	iroup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE ONE, INC.	ABLE STSTEM.					007407	Name
			TE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED FORTY-FIF	TH SUBSCRIBER GRO		ii		H SUBSCRIBER GROUI		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	Computation
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Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FORTY-SEVEN	TH SUBSCRIBER GRO	OUP	ONE HUNDRED F	ORTY-EIGHTH	H SUBSCRIBER GROU)	
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Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE ONE, INC. SYSTEM ID# 007407								
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LEGAL NAME OF OWNE CABLE ONE, INC.	R OF CABL	LE SYSTEM:				S	YSTEM ID# 007407	Name	
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COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	Computation			
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ONE HUNDRED FIF	TY-FIFTH	SUBSCRIBER GRO	UP	ONE HUNDRED FI	FTY-SIXTH	SUBSCRIBER GRO	UP		
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7 Name	YSTEM ID# 007407	S'			.	LE SYSTEM:		LEGAL NAME OF OWNER CABLE ONE, INC.	
		IBER GROUP	SUBSCR	TE FEES FOR EACH					
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Computation	COMMUNITY/ AREA 0							COMMUNITY/ AREA	
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