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.

STATEMENT OF ACCOUNT for Secondary Transmissions by

Cable Systems (Long Form)

General instructions are located in

the first tab of this workbook.

SA3E Long Form

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 TH	IIS STATEMENT:						
Accounting Period	2018/2							
B Owner	Instructions: Give the full legal name of the owner of the cable rate title of the subsidiary, not that of the parent corpo List any other name or names under which the ov If there were different owners during the account a single statement of account and royalty fee payment Check here if this is the system's first filing. If r	ration wner conducts the business of the cable sys ing period, only the owner on the last day ou the covering the entire accounting perioo	stem f the accounting period should	·	063009			
	LEGAL NAME OF OWNER/MAILING ADDRESS O	F CABLE SYSTEM						
	Verizon Pennsylvania LLC							
				06300	920182			
				063009	2018/2			
C System	PO Box 152092, MC: HQE03H19 Irving, TX 75015-2092 INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B. IDENTIFICATION OF CABLE SYSTEM:							
	I Verizon Fios TV (Harrisburg, PA) MAILING ADDRESS OF CABLE SYSTEM: 210 Pine Street (Number, street, rural route, apartment, or suite number) Harrisburg, PA 17101 (City, town, state, zip code)	VHO 14						
D	Instructions: For complete space D instructions	s, see page 1b. Identify only the frst com	munity served below and re	elist on page	e 1b			
Area	with all communities.							
Served	CITY OR TOWN	STATE						
First	CAMP HILL BORO	PA						
Community	Below is a sample for reporting communities if	you report multiple channel line-ups in						
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	3 GRP#			
Sample	Alda	MD	A	_	1			
	Alliance Gering	MD MD	B		2 3			
	Gening		B		5			
form in order to pro numbers. By provid	e: Section 111 of title 17 of the United States Code authorizes to be sourd statement of account. PII is any personal information ding PII, you are agreeing to the routine use of it to establish an pared for the public. The effect of not providing the PII requested	n that can be used to identify or trace an individua d maintain a public record, which includes appear	l, such as name, address and telep ing in the Offce's public indexes ar	ohone nd in				

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

02/25/2019

completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

FORM SA3E. PAGE 1b.				1				
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#					
Verizon Pennsylvania LLC			063009					
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The frst community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.								
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.								
If all communities receive the same complement of television broadcast stations (i.e., one channel line-up for all), then either associate all communities with the channel line-up "A" in the appropriate column below or leave the column blank. If you report any stations on a partially distant or partially permitted basis in the DSE Schedule, associate each relevant community with a subscriber group, designated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-community basis, associate each community with a								
channel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns		up designated by a	a number					
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	_				
CAMP HILL BORO	PA	A		First				
CARROLL TWP	PA	Α		Community				
CONEWAGO TWP	PA	Α						
DERRY TWP	PA	A						
DILLSBURG BORO	PA	A						
EAST PENNSBORO TWP	PA	Α		See instructions for				
FAIRVIEW TWP	PA	Α		additional information				
HAMPDEN TWP	PA	Α		on alphabetization.				
HIGHSPIRE BORO	PA	A						
HUMMELSTOWN BORO	PA	A						
LEMOYNE BORO	PA	Α						
LONDONDERRY TWP DAUPHIN	PA	Α		Add rows as necessary.				
LOWER ALLEN TWP	PA	Α						
LOWER PAXTON TWP	PA	Α						
LOWER SWATARA TWP	PA	Α						
MECHANICSBURG BORO	PA	Α						
MIDDLESEX TWP	PA	Α						
MIDDLETOWN BORO	PA	A						
MONAGHAN TWP	PA	A						
MONROE TWP	PA	A						
NEW CUMBERLAND BORO	PA	Δ						
NORTH LONDONDERRY TWP	PA	<u> </u>						
PALMYRA BORO	PA	<u>~</u>						
PALMINA BORO	PA PA	A						
		A						
PENBROOK BORO ROYALTON BORO	PA PA	A						
SHIREMANSTOWN BORO		A						
	PA	A						
SILVER SPRING TWP	PA	A .						
SOUTH HANOVER TWP	PA	A .						
SOUTH LONDONDERRY TWP	PA	A						
STEELTON BORO	PA	A						
SUSQUEHANNA TWP	PA	A						
SWATARA TWP	PA	A						
	PA	Α						
WEST HANOVER TWP	PA	Α						
WORMLEYSBURG BORO	PA	A						
		L		1				

	<u></u>								SA3E. PAGE			
Name	LEGAL NAME OF OWNER OF CABL	E SYSTEM:						S	STEM IC			
Naille	Verizon Pennsylvania L	.LC							06300			
	SECONDARY TRANSMISSION		IBSOD		ATES							
E	In General: The information in s					ry transmission	service of t	he cable				
	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information											
Secondary	about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the											
Transmission	last day of the accounting period (June 30 or December 31, as the case may be).											
Service: Sub- scribers and		n blocks in space E call for the number of subscribers to the cable system, broken										
Rates	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											
nuioo	separately for the particular serv							onargoa				
	Rate: Give the standard rate of	-	-				-					
	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				ries of sec	ondary transmis	ssion servir	e that cable				
	systems most commonly provide											
	that applies to your system. Not											
	categories, that person or entity											
	subscriber who pays extra for ca					d in the count ur	nder "Servio	ce to the				
	first set" and would be counted of Block 2: If your cable system					service that are	e different f	rom those				
	printed in block 1 (for example, t	-		•								
	with the number of subscribers a											
	sufficient.	0.01/ 4			1		DI OO	14.0				
	BL	OCK 1 NO. OF		1			BLOC	KZ NO. OF				
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RATE			
	Residential:											
	Service to first set	4	5,968	\$ 25.00								
	 Service to additional set(s) 											
	• FM radio (if separate rate)											
	Motel, hotel											
	Commercial		493	\$ 35.00								
	Converter											
	Residential											
	Non-residential											
					1							
	SERVICES OTHER THAN SEC							is a that ware				
F	In General: Space F calls for ra not covered in space E, that is, t											
-	service for a single fee. There a											
Services	furnished at cost or (2) services		,		0		υ.,					
Other Than	amount of the charge and the ur		usually	/ billed. If any ra	ates are ch	narged on a vari	able per-pr	ogram basis,				
Secondary Fransmissions:	enter only the letters "PP" in the Block 1: Give the standard ra		ho cab	lo system for or	och of the	applicable servi	cos listod					
Rates	Block 2: List any services that							were not				
	listed in block 1 and for which a											
	brief (two- or three-word) descrip	ption and inclue	de the r	ate for each.								
		BLO	CK 1					BLOCK 2				
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEGO	ORY OF SERVICE	RATE			
	Continuing Services:		Install	ation: Non-res	idential							
	• Pay cable	\$ 15.00	• Mo	otel, hotel			See Tab	Attachment B				
	 Pay cable—add'l channel 		• Co	ommercial								
	 Fire protection 			y cable								
		1	•Pa	y cable-add'l ch	nannel							
	•Burglar protection											
	Installation: Residential			e protection								
	Installation: Residential • First set	\$ 99.00	• Bu	rglar protection								
	Installation: Residential First set Additional set(s) 	\$ 99.00 \$ 65.00	• Bu Other	rglar protection services:								
	Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)		• Bu Other • Re	rglar protection services: connect								
	Installation: Residential First set Additional set(s) 		• Bu Other • Re • Dis	rglar protection services: econnect sconnect								
	Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)		• Bu Other • Re • Dis • Ou	rglar protection services: connect		\$ 65.00						

Biock 1 Pay Cable 15.00 15.00 Pay Cable - add'l Channel Installation - First Set 99.00 89.99 Installation - Additional Set(s) 65.00 34.99 Outlet Relocation 65.00 69.99 Block 2 Fios Current TV 40.00 Fios Current TV for Bar/Restaurant 40.00 Custom TV Kids & Pop 64.99 80.00 Custom TV Kids & Pop 64.99 80.00 Custom TV News & Variety 64.99 80.00 Custom TV News & Variety 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainmet & Drama 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme FD 79.99 110.00 Fios TV Mundo 49.99 N/A Sports Pass 14.00 15.00 Sports Pass (Bar/Rest.) N/A Va	Category of Service	Residential Rate	Commercial Rate
Installation - First Set 99.00 89.99 Installation - Additional Set(s) 65.00 34.99 Outlet Relocation 65.00 69.99 Block 2 Fios Current TV 40.00 Fios Current TV for Bar/Restaurant 40.00 Custom TV Kids & Pop 64.99 80.00 Custom TV Sports & News 64.99 80.00 Custom TV Action & Entertainment 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Home & Family 64.99 80.00 Custom TV Home & Family 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme for Bar/Rest. N/A Varies Fios TV Mundo Total 54.99 N/A Fios TV Mundo Total 54.99 N/A Fox Soccer Plus 14.00 15.00 Sports Pass (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax <t< td=""><td>Block 1 Pay Cable</td><td>15.00</td><td>15.00</td></t<>	Block 1 Pay Cable	15.00	15.00
Installation - Additional Set(s) 65.00 34.99 Outlet Relocation 65.00 69.99 Block 2	•		
Outlet Relocation 65.00 69.99 Block 2 Fios Current TV 40.00 Fios Current TV for Bar/Restaurant 40.00 Custom TV Kids & Pop 64.99 80.00 Custom TV Sports & News 64.99 80.00 Custom TV Action & Entertainment 64.99 80.00 Custom TV News & Variety 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Extreme for Bar/Rest. N/A Varies Fios TV Mundo Total 54.99 N/A Sports Pass 14.00 15.00 Sports Pass (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A 15.00 HBO 15.00 <td></td> <td></td> <td></td>			
Block 2 40.00 Fios Current TV for Bar/Restaurant 40.00 Custom TV Kids & Pop 64.99 80.00 Custom TV Sports & News 64.99 80.00 Custom TV Action & Entertainment 64.99 80.00 Custom TV Action & Entertainment 64.99 80.00 Custom TV Lifestyle & Reality 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Extreme for Bar/Rest. N/A Varies Fios TV Mundo Total 54.99 N/A Fox Soccer Plus 14.00 15.00 Sports Pass (Ultimate Customers) N/A Varies Cinemax 15.00 15.00 Epix 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00			
Fios Current TV for Bar/Restaurant 40.00 Custom TV Kids & Pop 64.99 80.00 Custom TV Sports & News 64.99 80.00 Custom TV Action & Entertainment 64.99 80.00 Custom TV News & Variety 64.99 80.00 Custom TV Lifestyle & Reality 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Fios TV Extreme HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Mundo Total 54.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus 14.99 14.99 Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 BO 15.00 15.00 Starz N/A 5.0		65.00	69.99
Custom TV Kids & Pop 64.99 80.00 Custom TV Sports & News 64.99 80.00 Custom TV Action & Entertainment 64.99 80.00 Custom TV News & Variety 64.99 80.00 Custom TV Lifestyle & Reality 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Home & Family 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Extreme HD 89.99 120.00 Fios TV Extreme for Bar/Rest. N/A Varies Fios TV Mundo Total 54.99 N/A Fios TV Mundo Total 54.99 N/A Fox Soccer Plus 14.00 15.00 Sports Pass (Ultimate Customers) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A 5.00 FBO 15.00 15.00 Showtime 15.00 15.00 Showtime 15.00 <	Fios Current TV		40.00
Custom TV Sports & News 64.99 80.00 Custom TV Action & Entertainment 64.99 80.00 Custom TV News & Variety 64.99 80.00 Custom TV Lifestyle & Reality 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Home & Family 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Extreme for Bar/Rest. N/A Varies Fios TV Mundo Total 54.99 N/A Fios TV Mundo Total 54.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Varies Sports Pass (Bar/Rest.) N/A 5.00 HBO 15.00 15.00 Starz N/A			40.00
Custom TV Action & Entertainment 64.99 80.00 Custom TV News & Variety 64.99 80.00 Custom TV Infestyle & Reality 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Home & Family 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Ultimate HD 89.99 120.00 Fios TV Mundo Total 54.99 N/A Fios TV Mundo 49.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 BO 15.00 15.00 Showtime 15.00 15.00	•		
Custom TV News & Variety 64.99 80.00 Custom TV Lifestyle & Reality 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Home & Family 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Utimate HD 89.99 120.00 Fios TV Mundo Total 54.99 N/A Fios TV Mundo Total 54.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Starz N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 25	•		
Custom TV Lifestyle & Reality 64.99 80.00 Custom TV Infotainment & Drama 64.99 80.00 Custom TV Home & Family 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Ultimate HD 89.99 120.00 Fios TV Mundo Total 54.99 N/A Fios TV Mundo 49.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Starz N/A 15.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 65.00 25 Mbps Internet 65.00 N/A			
Custom TV Infotainment & Drama 64.99 80.00 Custom TV Home & Family 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Extreme HD 89.99 120.00 Fios TV Ultimate HD 89.99 N/A Fios TV Mundo Total 54.99 N/A Fios TV Mundo 49.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Showtime 15.00 N/A Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mb	•		
Custom TV Home & Family 64.99 80.00 Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Ultimate HD 89.99 120.00 Fios TV Extreme for Bar/Rest. N/A Varies Fios TV Mundo Total 54.99 N/A Sports Pass 14.00 15.00 Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus 14.99 14.99 Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 60.00 N/A Starz/Encore	· · ·		
Fios TV Preferred HD 74.99 90.00 Fios TV Extreme HD 79.99 110.00 Fios TV Ultimate HD 89.99 120.00 Fios TV Extreme for Bar/Rest. N/A Varies Fios TV Mundo Total 54.99 N/A Fios TV Mundo Total 54.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus 14.99 14.99 Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 60.00 N/A TV Mundo Total 50.00 N/A N/A Cus			
Fios TV Extreme HD 79.99 110.00 Fios TV Ultimate HD 89.99 120.00 Fios TV Extreme for Bar/Rest. N/A Varies Fios TV Mundo Total 54.99 N/A Fios TV Mundo 49.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus 14.99 14.99 Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 25 Mbps Internet 60.00 N/A 50.00 N/A 50.00 TV Mundo 50.00 N/A Custom TV Ki	•		
Fios TV Ultimate HD 89.99 120.00 Fios TV Extreme for Bar/Rest. N/A Varies Fios TV Mundo Total 54.99 N/A Fios TV Mundo 49.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 BO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 25 Mbps Internet 65.00 N/A 50 Mbps Internet 50.00 N/A 7V Mundo 40.00 N/A 7V Mundo Total 50.00 N/A			
Fios TV Extreme for Bar/Rest.N/AVariesFios TV Mundo Total54.99N/AFios TV Mundo49.99N/ASports Pass14.0015.00Sports Pass (Ultimate Customers)N/AIncludedFox Soccer Plus14.9914.99Fox Soccer Plus (Bar/Rest.)N/AVariesSports Pass (Bar/Rest.)N/AVariesCinemax15.0015.00EPIX15.0015.00HBO15.0015.00Showtime15.0015.00StarzN/A15.00Ride TVN/A5.00Starz/Encore15.00N/AFios Prepaid Service Offering:25 Mbps Internet60.0025 Mbps Internet65.00N/A50 Mbps Internet50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Kids & Pop40.00N/ACustom TV News & Variety50.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
Fios TV Mundo Total 54.99 N/A Fios TV Mundo 49.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus 14.99 14.99 Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 60.00 N/A 50 Mbps Internet 65.00 N/A 7V Mundo N/A TV Mundo Total 50.00 N/A 7V Mundo N/A Custom TV Kids & Pop 40.00 N/A 7V Mundo N/A Custom TV Action & Entertainment 40.00 N/A 7A </td <td></td> <td></td> <td></td>			
Fios TV Mundo 49.99 N/A Sports Pass 14.00 15.00 Sports Pass (Ultimate Customers) N/A Included Fox Soccer Plus 14.99 14.99 Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 60.00 N/A 50 Mbps Internet 65.00 N/A 15.00 N/A TV Mundo 40.00 N/A 14.00 N/A TV Mundo Total 50.00 N/A 14.00 N/A Custom TV Kids & Pop 40.00 N/A 14.00 N/A Custom TV Action & Entertainment 40.00			
Sports Pass14.0015.00Sports Pass (Ultimate Customers)N/AIncludedFox Soccer Plus14.9914.99Fox Soccer Plus (Bar/Rest.)N/AVariesSports Pass (Bar/Rest.)N/AVariesCinemax15.0015.00EPIX15.0015.00HBO15.0015.00Showtime15.0015.00StarzN/A15.00Kide TVN/A5.00Starz/Encore15.00N/AFios Prepaid Service Offering:0N/A25 Mbps Internet60.00N/A50 Mbps Internet65.00N/ATV Mundo40.00N/ATV Mundo Total50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
Sports Pass (Ultimate Customers)N/AIncludedFox Soccer Plus14.9914.99Fox Soccer Plus (Bar/Rest.)N/AVariesSports Pass (Bar/Rest.)N/AVariesCinemax15.0015.00EPIX15.0015.00HBO15.0015.00Showtime15.0015.00StarzN/A15.00Ride TVN/A5.00Starz/Encore15.00N/AFios Prepaid Service Offering:25 Mbps Internet60.00N/A50 Mbps Internet65.00N/ATV Mundo40.00N/ATV Mundo Total50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
Fox Soccer Plus 14.99 14.99 Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 60.00 N/A 50 Mbps Internet 65.00 N/A 14.99 TV Mundo 40.00 N/A 15.00 TV Mundo Total 50.00 N/A 15.00 Custom TV Kids & Pop 40.00 N/A 14.99 Custom TV Action & Entertainment 40.00 N/A Custom TV News & Variety 50.00 N/A Custom TV News & Variety 50.00 N/A Custom TV Lifestyle & Reality 40.00 N/A	•		
Fox Soccer Plus (Bar/Rest.) N/A Varies Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 60.00 N/A 50 Mbps Internet 65.00 N/A 17V Mundo N/A TV Mundo 40.00 N/A 17V Mundo N/A TV Mundo Total 50.00 N/A 17V Mundo N/A Custom TV Kids & Pop 40.00 N/A 17A Custom TV Action & Entertainment 40.00 N/A Custom TV News & Variety 50.00 N/A Custom TV News & Variety 50.00 N/A Custom TV Lifestyle & Reality 40.00 N/A	, ,		
Sports Pass (Bar/Rest.) N/A Varies Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 25 Mbps Internet 60.00 N/A 50 Mbps Internet 65.00 N/A TV Mundo 40.00 N/A TV Mundo Total 50.00 N/A Custom TV Kids & Pop 40.00 N/A Custom TV Action & Entertainment 40.00 N/A Custom TV News & Variety 50.00 N/A Custom TV News & Variety 50.00 N/A Custom TV Lifestyle & Reality 40.00 N/A			
Cinemax 15.00 15.00 EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 60.00 N/A 25 Mbps Internet 65.00 N/A 7 7V Mundo 40.00 N/A 7 7V Mundo Total 50.00 N/A 7 Custom TV Kids & Pop 40.00 N/A 7 Custom TV Sports & News 50.00 N/A 7 Custom TV Action & Entertainment 40.00 N/A 7 Custom TV News & Variety 50.00 N/A 7 Custom TV Lifestyle & Reality 40.00 N/A 7	· ,		
EPIX 15.00 15.00 HBO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 25 Mbps Internet 60.00 N/A 50 Mbps Internet 65.00 N/A 7V TV Mundo 40.00 N/A 7V TV Mundo Total 50.00 N/A 7V Custom TV Kids & Pop 40.00 N/A 7V Custom TV Action & Entertainment 40.00 N/A 7V Custom TV News & Variety 50.00 N/A 7V Custom TV Lifestyle & Reality 40.00 N/A 7V	,		
HBO 15.00 15.00 Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 15.00 N/A 25 Mbps Internet 60.00 N/A 50 Mbps Internet 65.00 N/A TV Mundo 40.00 N/A TV Mundo Total 50.00 N/A Custom TV Kids & Pop 40.00 N/A Custom TV Sports & News 50.00 N/A Custom TV Action & Entertainment 40.00 N/A Custom TV News & Variety 50.00 N/A Custom TV Lifestyle & Reality 40.00 N/A			
Showtime 15.00 15.00 Starz N/A 15.00 Ride TV N/A 5.00 Starz/Encore 15.00 N/A Fios Prepaid Service Offering: 15.00 N/A 25 Mbps Internet 60.00 N/A 50 Mbps Internet 65.00 N/A TV Mundo 40.00 N/A TV Mundo Total 50.00 N/A Custom TV Kids & Pop 40.00 N/A Custom TV Sports & News 50.00 N/A Custom TV Action & Entertainment 40.00 N/A Custom TV News & Variety 50.00 N/A Custom TV Lifestyle & Reality 40.00 N/A			
StarzN/A15.00Ride TVN/A5.00Starz/Encore15.00N/AFios Prepaid Service Offering:725 Mbps Internet60.00N/A50 Mbps Internet65.00N/ATV Mundo40.00N/ATV Mundo Total50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Sports & News50.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
Ride TVN/A5.00Starz/Encore15.00N/AFios Prepaid Service Offering:25 Mbps Internet60.00N/A50 Mbps Internet65.00N/ATV Mundo40.00N/ATV Mundo Total50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Sports & News50.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
Starz/Encore15.00N/AFios Prepaid Service Offering:60.00N/A25 Mbps Internet60.00N/A50 Mbps Internet65.00N/ATV Mundo40.00N/ATV Mundo Total50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Sports & News50.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
Fios Prepaid Service Offering:25 Mbps Internet60.00N/A50 Mbps Internet65.00N/ATV Mundo40.00N/ATV Mundo Total50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Sports & News50.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
50 Mbps Internet65.00N/ATV Mundo40.00N/ATV Mundo Total50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Sports & News50.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A	Fios Prepaid Service Offering:		
TV Mundo40.00N/ATV Mundo Total50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Sports & News50.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A	•		
TV Mundo Total50.00N/ACustom TV Kids & Pop40.00N/ACustom TV Sports & News50.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A	•		
Custom TV Kids & Pop40.00N/ACustom TV Sports & News50.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
Custom TV Sports & News50.00N/ACustom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
Custom TV Action & Entertainment40.00N/ACustom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A			
Custom TV News & Variety50.00N/ACustom TV Lifestyle & Reality40.00N/A	•		
Custom TV Lifestyle & Reality 40.00 N/A			
	• •		
,			
Spanish Language Package16.00VariesMusic Choice PackageN/A34.00			
Music Choice PackageN/A34.99Playboy16.99N/A			
- j j			
International Premium On DemandVariesVariesOn Demand Movies and GamesVariesVaries			
On Demand SubscriptionsVariesVariesVariesVariesVaries			

	Residential	Commercial
Category of Service	Rate	Rate
Pay Per View	Varies	Varies
MLB Extra Innings	199.00	Varies
MLS Direct Kick	89.00	Varies
NBA League Pass	210.00	Varies
NHL Center Ice	188.00	Varies
CableCARD	4.99	4.99
Digital Adapter	7.99	8.00
Set-Top Box First two boxes	12.00	11.99
Set-Top Box: Boxes 3-5	6.00	
Set-Top Box: 6+ boxes	No charge	
Fios Quantum Gateway Router	N/A	9.99
Fios Wireless Router	10.00	N/A
Fios Advanced Wi-Fi Router	7.99	N/A
HD Business Media DVR	N/A	26.99
HD Digital DVR	N/A	23.99
Fios TV Activation Fee	N/A	99.99
DVR Service	12.00	N/A
Multi-room DVR Service	15.00	N/A
Multi-room DVR Enhanced Service	20.00	N/A
Multi-room DVR Premium Service	30.00	N/A
Agent Assistance Fee	7.00	
Fios TV Setup w New Outlets	160.00	N/A
New Outlet Install/Existing Relocation	65.00	69.99
Peak-Time Installation	N/A	49.99
Tech Visit Charge Subsequent	100.00	99.99
New Outlet Installation Subsequent	65.00	69.99
Existing Outlet Connection Subsequent	65.00	34.99
Service Charge	up to 100.00	120.00/55.00
Set-Top Box Return - UPS/Retail	Free	No Charge
Standard Shipping Charge	N/A	25.00
Expedited Shipping Charge (additional)	15.00	15.00
Specialty DVR Upgrade	50.00	N/A
Set-Top Box Addition (self-install)	N/A	No Charge
Set-Top Box Add/Upgrade	25.00	N/A
Set-Top Box Retrieval Fee	N/A	99.99
TV Equipment Upgrade	50.00	N/A
TV Equipment Tech Install	110.00	N/A
Seasonal Service Suspenstion	50.00	N/A
Fios TV Suspend for non payment	50.00	29.99
Fios Replacement Remote	15.00	14.99
Unreturned/Damaged Wireless Router	100.00	100.00
Unreturned/Damaged CableCARD	70.00	70.00
Unreturned/Damaged Digital Adapter	90.00	90.00
Unreturned/Damaged STB SD	160.00	160.00
Unreturned/Damaged STB Media Client	120.00	N/A
Unreturned/Damaged STB Fios Svc Unit	210.00	210.00
Unreturned/Damaged STB HD	190.00	190.00
Unreturned/Damaged STB SD DVR	330.00	N/A
Unreturned/Damaged STB HD DVR	260.00	260.00
Unreturned/Damaged STB Media Server	375.00	N/A

Name

G

Primary

Transmitters:

Television

SYSTEM ID#

063009

LEGAL NAME OF OWNER OF CABLE SYSTEM: Verizon Pennsylvania LLC PRIMARY TRANSMITTERS: TELEVISION

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

basis under specific FCC rules, regulations, or authorizations:
Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the

 Do not list the station nere in space G—but do list it in 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.

						-
		CHANN	EL LINE-UP	Α		
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	_
WHP	21	N	No		Harrisburg	
WITF	33	E	No		Harrisburg	See instructions for
WPMT	43	I	No		York	additional information
WGAL	8	N	No		Lancaster	on alphabetization.
WHTM	27	N	No		Harrisburg	
WHP CW	21	I	No		Harrisburg	
WGCB	49	I	No		Red Lion	
WHP My Network	21	I	No		Harrisburg	
W07DP	7	I	No		Harrisburg	
WHP-simulcast	4	N	No		Harrisburg	
WITF-simulcast	36	E	No		Harrisburg	
WPMT-simulcast	23	I	No		York	
WGAL-simulcast	58	N	No		Lancaster	
WHTM-simulcast	10	N	No		Harrisburg	
WGCB-simulcast	49	I	No		Red Lion	
WHP CW-simulca	21	I	No		Harrisburg	
WGAL MeTV	8	N-M	No		Lancaster	
WHTM getTV	10	N-M	No		Harrisburg	

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.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Verizon Pennsylvania LLC 063009 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 A 1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION CHANNEL OF CARRIAGE SIGN (Yes or No) NUMBER STATION (If Distant) WPMT Antenna T No York 23 I-M WITF PBS Kids 33 E-M No Harrisburg See instructions for WXBU CometTV additional information 15 I-M No Lancaster on alphabetization.

ACCOUNTING PERI	•							FORM SASE. FAGE 4.			
	LEGAL NAME OF (OWNER OF CABL	E SYSTE	M:				SYSTEM ID#			
Name	Verizon Pen	nsvlvania L	LC					063009			
		- ,	-								
Н	PRIMARY TRANSMITTERS: RADIO In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period.										
		-	-								
Primary				-Band FM Carriage: Under C							
Transmitters:				tem whenever it is received at							
Radio				ved at the headend, with the s							
	For detailed info	ormation about	t the the	Copyright Office regulations o	n this point, see	page (vi) of the	e genera	al instructions			
	located in the pa	aper SA3 form									
	Column 1: lo	lentify the call	sign of e	ach station carried.							
	Column 2: S	tate whether t	he statio	n is AM or FM.							
	Column 3: If	the radio stati	on's sigr	al was electronically processe	ed by the cable s	ystem as a se	oarate a	nd discrete			
				mark in the "S/D" column.							
				on (the community to which the	e station is licens	ed by the FCC	or in th	ne case of			
				he community with which the							
	WEXICAL OF CAL		, ii aiiy, i			-u).					
		AM or FM					0/5				
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION			
							[
							L				
							[
	L	I		I I	1	L	I	I]			

Substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further xplanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. SUBSTITUTE CARRIAGE: SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program locadcast by a distant station? Yes [No] Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program gin block 2. Colum 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 nuder certain FCC rules, regulations, or authorizations. See page (v) of the general instructions located in the paper SA3 form. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting eriod, was broadcast by a distant station and that your cable system substituted for the programming of another station nuder certain FCC rules, regulations, or authorizations. See page (w) of the general instructions located in the paper SA3 form. Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting eriod, was broadcast by a distant station and that your cable system substitute for more space, please attach additional pages. Column 2: If the program was broadcast live, enter "No." Column 2: If the program was broadcast live, enter "No." Column 4: Give the broadcast station's locating (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 licensed by the FCC or, in the case of Mexican or Cana	LEGAL NAME OF OWNER OF	CABLE SYST	EM:				SYSTEM ID#		
A General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a ubstitute basis during the accounting period, under specific present and former FCC rules, regulations, or a durbrizations. For a further xplanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program roadcast by a distant station? I does if your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program ag in block 2. Column 1: Give the tille of every nonnetwork television program (substitute program) that, during the accounting reind, was broadcast by a distant station and that your cable system substitute for the programming of another station different frC rules, regulations, or authorizations. See page (v) of the general instructions located in the paper A3 form for further information. Do not use general categories like "movies", or "basketball". List specific program test, for example, "I to ve Lovy" or "NBA Basketball: "Foer vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the union thad day when your system carried the substitute program. Column 4: Give the broadcast stations in community with which the station is identified). Column 7: Enter the letter "R" if the listed program was carried by a system form 6:01:15 p.m. to 6:28:30 p.m. should be tated as "6:00-6:30 p.m.". Column 7: Enter the letter "R" if the listed program was permitted to delete under FCC rules and regulations in ffect on October 19, 1976. <u>SUBSTITUTE PROGRAM</u> <u>L. UVEP</u> <u>S. STATIONS</u> <u>S. MONTH</u> <u>6. TIMES</u> <u>CARRIAGE OCCURRED</u> <u>7. REASON DELETION </u>	Verizon Pennsylvania	LLC					063009	Name	
ubsitute basis during the accounting period, under specific present and former FCC rules, regulations, for a further xplanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form. Subsitute SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE Image: Special instructions located in the paper SA3 form. Subsitute Join block 2. Image: Special instructions located in the paper SA3 form. Subsitute for special instructions located in the paper SA3 form. Subsituite Image: Special instructions located in the paper SA3 form. Image: Special instructions located in the paper SA3 form. Subsituite Image: Special instructions located in the paper SA3 form. Image: Special instructions located in the paper SA3 form. Subsitute Image: Instructions located in the paper SA3 form for further information. Image: Special instructions located in the paper SA3 form for further information. Do not use general categories like "movies", or "basketball". List specific program the paper SA3 form for further information. Do not use general categories like "movies", or "basketball". List specific program the station in formation. Solcation (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations is location (the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations is decated the program. Solum 1: Give the broadcast station is location (the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations in effect during the accounting period; enter the letter "R"	SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	IT AND PROGRAM LOG					
Carriage: Special Statement and For a case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in he case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in he case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in he case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in he case of Mexican or Canadian stations, if any, the community the substitute program. Use number of Carriage: Substitute for more than the substitute program was substitute program the station is licensed by the feed on the station is dentified). Column 3: Give the the leal region arangement and any usystem from 6:01:15 p.m. to 6:28:30 p.m.* Column 4: Give the lite of program was permitted to delete under FCC rules and regulations in effect on October 19, 1976. Column 7: Enter the letter "R" if the listed program was permitted to delete under FCC rules and regulations in effect on October 19, 1976. Carriage: Substitute PROGRAM L. LIVE? LIVE? SUBSTITUTE PROGRAM L. LIVE? LIVE? SUBSTITUTE SUBSTITUTE CARRIAGE CARRIAGE OCCURRED TO A State the letter "R" if the listed program was permitted to delete under FCC rules and regulations in effect on October 19, 1976. Carriage: Substitute for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976. Carriage: Substitute PROGRAM L. LIVE? LI	substitute basis during the ac	ccounting pe	eriod, under spe	cific present and former FC	C rules, regula	ations, or authorizations	5. For a further	Substitute	
During the accounting period, on your cable system carry, on a substitute basis, any nonnetwork television program in a read cast by a distant station? Statement and Program Log Substitute is the title of every nonnetwork television program (substitute program) that, during the accounting eriod, was broadcast by a distant station and that your cable system substituted for the programming of another station network television program (substitute program) that, during the accounting eriod, was broadcast by a distant station and that your cable system substituted for the programming of another station network television program (substitute program) that, during the accounting eriod, was broadcast by a distant station and that your cable system substituted for the programming of another station network television program (substitute program) that, during the accounting eriod, was broadcast by a distant station. Do not use general categories like "movies", or "basketball". List specific program tess for example, "I Love Lucy" or "NBA Basketball: Toers vs. Bulls." Statement and Program Was broadcast live, ener Yes." Otherwise enter "No." Column 2: If the program was broadcast tive, enter Yes." Otherwise enter "No." 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 6: Give the month and day when your system carried by a system for 6:01:15 p.m. to 6:28:30 p.m." Source and regulations in effect during the accounting period, enter the letter "P" if the listed pro ramm was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period, enter the letter"P" if the listed pro ramm was substituted for progra					<u>j</u>			Carriage:	
Iote: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program Ig in block 2. C. LOG OF SUBSTITUTE PROGRAMS n General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is lear. 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 eriod, was broadcast by a distant station and that your cable system substituted for the programming of another station inder certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper states, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the 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 to which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month rst. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be tated 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 by delet 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 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 program			r cable system	carry, on a substitute basi	s, any nonne			Statement and	
n General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is lear. 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 eriod, was broadcast by a distant station and that your cable system substituted for the programming of another station inder certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper A3 form for further information. Do not use general categories like "movies", or "basketball". List specific program teles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Use numerals, with the month ract catedast station's location (the community with which the station is licensed by the FCC or, in ne case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in ne case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in ne case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in the case site the times when the substitute program was carried by your cable system. List the times accurately or the nearest five minutes. Example: a program was substituted for programming that your system was required tated 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 permitted to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro ram was substituted for programmin	Note: If your answer is "No' log in block 2.	", leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	ist complete the progr	am	1.09.4.11.209	
SUBSTITUTE PROGRAM WHEN SUBSTITUTE 7. REASON 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES DELETION	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." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." 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 pro								
SUBSTITUTE PROGRAM CARRIAGE OCCURRED FOR 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES DELETION	enection October 19, 1976.				WHE	EN SUBSTITUTE			
	S						FOR		
Image: section of the section of th	1. TITLE OF PROGRAM								
Image: Section of the section of th									
Image: second									
Image: second									
Image: Second									
Image: Section of the sec						_			
Image: Second secon						_			
Image: selection of the selec						_			
Image: second						_			
Image: second						_			
Image: select						_			
Image: selection of the						_			
Image: selection of the						_			
Image: selection of the selec						_			
						_			
						_			
						_			

FORM SA3E. PAGE 5.

—

ACCOUNTING PERIOD: 2018/2

ACCOUNTING PERIOD: 2018/2

FORM SA3E. PAGE 6.

NI	LEGAL NAME OF (OWNER OF CABLE	SYSTEM:						SYS	STEM ID#
Name	Verizon Pen	nsylvania L	LC							063009
	PART-TIME CA	ARRIAGE LOG								
J Part-Time Carriage Log	 In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." "Example: "12:30 a.m.– 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 12:00 p.m." 									
			DATES	AND HOURS ()F F	ART-TIME CAF	RIAGE			
		WHEN	I CARRIAGE OCCL	JRRED			WHEN	I CARRIAGE O	CURF	RED
	CALL SIGN		HOUF			CALL SIGN			OURS	
		DATE	FROM	TO			DATE	FROM		TO
									. <u> </u>	
			_							
			_							·
			_						_	
									_	
									_	
									_	
									_	
									<u> </u>	
									<u> </u>	
			_						_	
			_						_	
									_	
									_	

FORM	SA3E. PAGE 7.							
LEGA	L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name					
Ver	izon Pennsylvania LLC	063009	name					
Inst all a (as page	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.							
COPY	RIGHT ROYALTY FEE		_					
 Instru Con Con If you feet If you 	ctions: Use the blocks in this space L to determine the royalty fee you owe: pplete block 1, showing your minimum fee. pplete block 2, showing whether your system carried any distant television stations. ur 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. ur system did carry any distant television stations, you must complete the applicable p ompanying this form and attach the schedule to your statement of account.		L Copyright Royalty Fee					
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	be entered on line 1 of						
If particular between seven seve	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered on line 2 in block						
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entered on line						
	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.							
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064	\$ 15,848,318.72						
	Enter the result here. This is your minimum fee.	\$ 168,626.11						
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 Yes—Complete the DSE schedule. 	mn 4, you must check iod?						
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	\$ -						
5	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00						
	Line 3. Add lines 1 and 2 and enter here	\$-						
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	\$ 168,626.11	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					
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 169,351.11	appropriate form for submitting the additional fees.					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. general instructions located in the paper SA3 form for more information.)	(See page (i) of the						

ACCOUNTING PERIOD:	2018/2
--------------------	--------

ACCOUNTING PERI	100. 2018/2	FORM SA3E. PAGE 8.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Verizon Pennsylvania LLC	063009
	CHANNELS	
Μ	Instructions: You must give (1) the number of channels on which the cable system carried television broadcast	t stations
	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
Channels		
	1. Enter the total number of channels on which the cable	21
	system carried television broadcast stations	
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	070
	and nonbroadcast services	373
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual	
IN	we can contact about this statement of account.)	
Individual to		
Be Contacted		070 444 5550
for Further Information	Name Brad Wright Telephone	972-444-5553
mormation		
	Address PO Box 152092, MC: HQE03H19 (Number, street, rural route, apartment, or suite number)	
	Irving, TX 75015-2092 (City, town, state, zip)	
	Email brad.wright@verizon.com Fax (optional) 877-875-	8841
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office re	gulations
0		guiations.
Certifcation	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	
Certification		
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space	e B; or
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cab	e 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 identifed as c	wner 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 contail	ned herein
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	
	[18 U.S.C., Section 1001(1986)]	
	/s/ Veronica C. Glennon	
	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 curso	
	"F2" button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotu	is compatibility settings.
	Typed or printed name: Veronica C. Glennon	
	Title: Assistant Secretary, Verizon Pennsylvania LLC (Title of official position held in corporation or partnership)	
	(i lue or orriclal position held in corporation or partnership)	
	Date: March 1, 2019	
	I	
Privacy Act Notice	e: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information of the United States Code authorizes the Copyright Offce to collect the personally identifying information of the United States Code authorizes the Copyright Offce to collect the personally identifying information of the United States Code authorizes the Copyright Offce to collect the personally identifying information of the United States Code authorizes the Copyright Offce to collect the personally identifying information of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the United States Code authorizes the Copyright Offce to collect the personal of the Copyright Offce to collect the Copyright Offce to collect the persona	ation (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 Office'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 th 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 lav

FORM	SA3E	PAGE9
	JAJL.	I AULS

LEGAL NAME OF OWNER OF CABLE SYSTEM: Verizon Pennsylvania LLC	SYSTEM ID# 063009	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyrig lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cabl service of providing secondary transmissions of primary broadcast transmitters, the sys scribers and amounts collected from subscribers receiving secondary transmissions pu	e system for the basic stem shall not include sub-	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the ger paper SA3 form. During the accounting period did the cable system exclude any amounts of gross receipts for a made by satellite carriers to satellite dish owners?		Concerning Gross Receipts Exclusion
X NO YES. Enter the total here and list the satellite carrier(s) below		
Name Name Mailing Address Mailing Address		
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late p For an explanation of interest assessment, see page (viii) of the general instructions in the page		Q
Line 1 Enter the amount of late payment or underpayment	x	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	x days	
Line 3 Multiply line 2 by the number of days late and enter the sum here		
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)	-	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	(interest charge) further assistance please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late	2.	
NOTE: If you are filing this worksheet covering a statement of account already submitted to th please list below the owner, address, first community served, accounting period, and ID numb filing.		
Owner Address		
First community servedAccounting period		
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the persona	lly identifying information (PII) requested or	n 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 Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.