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						
08/09/19	\$ ALLOCATION NUMBER						

Return completed workbook by email to:

coplicsoa@copyright.gov

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

Α	ACCOUNTING PER	IOD COVERED BY THIS STATE	MENT:							
Accounting	2019/1									
Period										
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corpo rate title of the subsidiary, not that of the parent corporation List any other name or names under which the owner conducts the business of the cable system If there were different owners during the accounting period, only the owner on the last day of the accounting period should subminating a single statement of account and royalty fee payment covering the entire accounting period Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.									
	LEGAL NAME OF OWN	ER/MAILING ADDRESS OF CABLE SY	'STEM							
	City of San Bru	ino								
	•	nicipal Cable TV								
		par cause : :								
					2019/1					
	567 El Camino	Real								
	San Bruno, CA	94066								
			10 11 05 0 1 1							
С		e 1, give any business or trade name in space B. In line 2, give the mailing								
System	. IDENTIFICATION OF C			9						
Oystelli	1	nicipal Cable TV								
	MAILING ADDRESS OF	•								
	398 El Camino	Real								
		, apartment, or suite number)								
	San Bruno, CA	94066								
_										
D	Instructions: For comp	plete space D instructions, see page	1b. Identify only the frst com	munity served below and rel	ist on page 1b					
Area	with all communities.									
Served	CITY OR TOWN		STATE							
First	City of San Bru	ino	CA							
Community	Below is a sample for	reporting communities if you report r	nultiple channel line-ups in S	Space G.						
	CITY OR TOWN (SA	MPLE)	STATE	CH LINE UP	SUB GRP#					
Sample	Alda		MD	Α	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 suffciency of the fling, a determination that would be made by a court of law.

FORM SA3E. PAGE 1b.				T-							
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#								
City of San Bruno											
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-comm 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	d a subscriber grou										
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	1							
City of San Bruno	CA			First							
				Community							
				See instructions for							
				additional information							
				on alphabetization.							
				Add rows as necessary							
				·							

1	

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 2. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name City of San Bruno SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES Ε 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 Secondary Transmission 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 Service: Subscribers and down by categories of secondary transmission service. In general, you can compute the number of subscribers in Rates 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. **BLOCK 1** BLOCK 2 NO. OF NO. OF CATEGORY OF SERVICE CATEGORY OF SERVICE **SUBSCRIBERS RATE SUBSCRIBERS** RATE Residential: 4,503 · Service to first set \$ 20.55 · Service to additional set(s) • FM radio (if separate rate) Motel, hotel Commercial Converter Residential Non-residential 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 F 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 Services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the Other Than amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, Secondary 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. Transmissions: Block 2: List any services that your cable system furnished or offered during the accounting period that were not Rates 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. BLOCK 1 BLOCK 2 CATEGORY OF SERVICE DATE CATEGORY OF SERVICE DATE CATECORY OF SERVICE

CATEGORY OF SERVICE	KAIL	CATEGORT OF SERVICE	RAIL	CATEGORY OF SERVICE	RAIL
Continuing Services:		Installation: Non-residential			
Pay cable		 Motel, hotel 			
 Pay cable—add'l channel 		Commercial			
Fire protection		 Pay cable 			
Burglar protection		 Pay cable-add'l channel 			
Installation: Residential		Fire protection			
• First set	\$ 25.00	Burglar protection			
Additional set(s)		Other services:			
• FM radio (if separate rate)		Reconnect	\$ 35.00		
Converter		Disconnect			
		Outlet relocation	\$ 35.00		
		 Move to new address 			
•	•	•	•	•	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name City of San Bruno 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 CHANNEL OF (Yes or No) CARRIAGE SIGN NUMBER STATION (If Distant) KTVU-FOX 2 No OAKLAND, CA ı KNTV-NBC 11 Ν No SAN JOSE, CA See instructions for additional information KRON 4 Ν No SAN FRANCISCO, CA on alphabetization. Ν No **KPIX-CBS** 5 SAN FRANCISCO, CA KICU-PLUS 36 1 No SAN JOSE, CA Ν **KGO TV-ABC** 7 No SAN JOSE, CA KTSF 26 No BRISBANE, CA ı **KQED-PBS** 9 Ε No SAN FRANCISCO, CA **KQED-PLUS PBS** Ε 9.2 No SAN FRANCISCO, CA **KBCW-CW** Ν No 44 SAN FRANCISCO, CA KOFY 20 ı No SAN FRANCISCO, CA KKPX-ION 65 Ν No SAN JOSE, CA **KCSM** 60 Ν No SAN MATEO, CA KSTS-TELEMUND 48 Ν No SAN JOSE, CA Ν KTNC-SF 42 No CONCORD, CA 38 Ν KCNS-SBN No SAN FRANCISCO, CA KGODT2 7.2 Ν No SAN FRANCISCO, CA **KQED V-ME** 9.3 Ε No SAN FRANCISCO, CA

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name City of San Bruno 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.

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CHANNEL LINE-UP AB									
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				
KQED KIDS	54.4	E	No		SAN FRANCISCO, CA				
KQED WORLD	9.3	E	No		SAN FRANCISCO, CA				
KQED LIFE	54.3	Е	No		SAN FRANCISCO, CA				
KGODT3-LAFF	7.3	N	No		SAN FRANCISCO, CA				
KNTVDT2-COZ	#N/A	#N/A	No		#N/A				
KPIXDT2-DEC	5.2	N	No		SAN FRANCISCO, CA				
KRONDT3	4.3	N	No		SAN FRANCISCO, ca				
KICU-KBS	36.2	I	No		SAN JOSE, CA				
KICU-CCTV	36.3	I	No		SAN JOSE, CA				
KTVU-LATV	2.2	N	No		OAKLAND, CA				
KTLN	68	I	No		NOVATO, CA				
					ļ				

FORM SA3E. PAGE 3.						
LEGAL NAME OF OV		YSTEM:			SYSTEM ID#	Name
City of San Bi	uno					
PRIMARY TRANSMIT	TERS: TELEVISIO	ON				
In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 5 substitute Basis basis under specific Po not list the station was carrie List the station was carrie List the station here basis. For further in the paper SA3 Column 1: List each multicast stream as "WETA-simulcast). Column 2: Give tits community of lice on which your cable Column 3: Indica educational station, but (for independent mul For the meaning of the Column 5: If you cable system carried the distant station for the retransmis of a written agreeme the cable system and tion "E" (exempt). Fo explanation of these Column 6: Give times and the column 6: Give times carried the column 6: Give the column 6: Give the carried for the secolumn 6: Give the carried for the cable system and tion "E" (exempt). Fo explanation of these Column 6: Give the carried for the cable system and tion "E" (exempt). Fo explanation of these Column 6: Give the carried for the carried for the secolumn 6: Give the carried for the carried for the secolumn 6: Give the carried for the carried for the secolumn 6: Give the carried for the carried for the secolumn 6: Give the carried for the c	G, identify ever system during the ations in effect or 76.61(e)(2) and (asis, as explaine Stations: With FCC rules, regular on here in space of only on a subset, and also in spainformation conform. The ach station's call on associated with FA-2". Simulcast the channel numbers, and also in spainformation conform. The channel numbers, simulcast with the channel numbers, and also in spainform area from the case with the channel numbers, and the channel numbers, and the case with the channel numbers, and the case with the distant station is outside wice area, see phave entered "Y the distant station on a part-time simulcast, also the categories in the location of earth of the categories in the categories in the coation of earth of the categories in the categor	y television st he accounting in June 24, 194, or 76.63 (i 4), or 76.63 (i 4), or 76.63 (i 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 h e, WRC is Cha- ne station. whether the stater "N" (for no oncommercial page (v) of the ter "N" (for no oncommercial page (v) of the the local servage (v) of the es" in column on during the ame basis becan multicast stream or before Ju mitter or an a- onenter "E". If , see page (v) ch station. Fo	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations orizations: to the station was carried that the station was carried that the station was carried to the station was carried to the station was carried to the period of the station was assigned to the station is a network of the station was assigned to the stational, the stational, the stational was assigned in the stational was assigned to the stationary was assigned to the stationary was assigned to the	(1) stations carried ecarriage of cert 1(e)(2) and (4))]; as a carried by your of the Special Statement of both on a substitute, see page (v) of the program service er-the-air designate column 1 (list each the television statington, D.C. This book station, an indefor network multicor "E-M" (for noncontions located in the insplete column 5, and Indicate by enactivated channel of subject to a royalty steween a cable systement of the primal channel on any of instructions located list the community is the community of the primal channel on any of instructions located list the community is the subject to a country of the primal channel on any of instructions located list the community is the subject to a country of the primal channel on any of instructions located list the community is the subject to a country of the primal channel on any of the prim	es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system	G Primary Transmitters: Television
Note: If you are utiliz	ing multiple chai	•	•		cnannel line-up.	
	1	CHANN	EL LINE-UP	AC		
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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					-	
		T		*	<u> </u>	

FORM SA3E. PAGE 3.						,	
LEGAL NAME OF OWN	NER OF CABLE S	YSTEM:			SYSTEM ID#	Name	
City of San Bru	ıno					Nume	
PRIMARY TRANSMITT	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), 07.61(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-N" (for network multicast), "I" (for independent), "I-N" (for ind							
FCC. For Mexican or (Note: If you are utilizing				•	n which the station is identifed. channel line-up.		
,	<u> </u>		EL LINE-UP	<u> </u>			
1. CALL	2 DICACT	3. TYPE			C LOCATION OF STATION		
SIGN	2. B'CAST CHANNEL	OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION		
	NUMBER	STATION	,	(If Distant)			
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
City of San Bru	ino					Nume
PRIMARY TRANSMITTI	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 bas Substitute Pasis Substitute Pasis Substitute Pasis 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 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 h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the	G, identify even- system during to ions in effect on ions in effect conditions: With in ions in space only on a subs and also in space only on a subs and also in space information concurrs. The station's call associated with ions in each case were carried the ions in each case were in each case with	y television standard accounting in June 24, 194, or 76.63 (in did in the next prespect to any ations, or auth G—but do listitute basis. In the standard account in a station account in a station account in a station account in a station account in a station. In the local service in column in during the ear in column in during the ear in or before Jumitter or an account in the station account in the local service in column in during the ear in or before Jumitter or an account in the local service in column in during the ear in or before Jumitter or an account in the local service in column in during the ear in or before Jumitter or an account in the local service in column in the local service in or before Jumitter or an account in the local service in or before Jumitter or an account in the local service in a ser	g period, except 81, permitting the 181, permitting the 181, permitting the 181, permitting the 181, permitting to 76.6 paragraph. If distant stations orizations: It it in space I (the 181 tinn was carried the 181 tinn was carried the 181 tinn was carried to 181 tinn was station to 181 tinn was assigned to 181 tinn wa	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on program services the television statification, D.C. This work station, an indefor network multicute of "E-M" (for noncontext of the service of the station of the st	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your dering "LAC" if your cable system expapacity. expapacity. expapacity to a payment because it is the subject estem or an association representing expect transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form.	Primary Transmitters: Television
				•	to which the station is licensed by the which the station is identifed.	
Note: If you are utilizing	ng multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AE		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
City of San Bru	ıno					
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
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		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	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
City of San Bru	ino					
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON				
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Note: If you are utilizing	ig multiple char		·		channel line-up.	
	1	CHANN	EL LINE-UP	AG		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						•
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
City of San Bru	ino					
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), 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 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 i						
explanation of these th	ree categories	, see page (v)	of the general i	instructions locate	ther basis, enter "O." For a further d in the paper SA3 form.	
	Canadian statio	ns, if any, giv	e the name of th	ne community with	which the station is identifed.	
		CHANN	EL LINE-UP	AH		
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 OV		YSTEM:			SYSTEM ID#	Name
City of San B	runo					
PRIMARY TRANSMIT	TERS: TELEVISION	NC				
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Note: If you are utilize	zing multiple cha	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	Al		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
City of San Bru	ino					
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Note: If you are utilizing	ig multiple char			·	cnannei iine-up.	
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FORM SA3E. PAGE 3						
LEGAL NAME OF OV		YSTEM:			SYSTEM ID#	Name
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FORM SA3E. PAGE 3						
LEGAL NAME OF O		YSTEM:			SYSTEM ID#	Name
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Note: If you are utilize	zing multiple chai	nnel line-ups,	use a separate	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AL		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
						
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FORM SA3E. PAGE 3	l					
LEGAL NAME OF O		YSTEM:			SYSTEM ID#	Name
City of San B	runo					
PRIMARY TRANSMIT	TERS: TELEVISION	ON				
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Note: If you are utili	zing multiple cha	nnei iine-ups,	use a separate	space G for each	cnannei line-up.	
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						,
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name
City of San Bru)N				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute pasis 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 nutlicast). For the meaning of these terms, see pa						
		CHANN	EL LINE-UP	AN		
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)		
	HOMBER	CIATION		(ii Biotant)		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	/STEM:			SYSTEM ID#	Name
City of San Bru	ino					
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bass. Substitute Basis is basis under specific FC bo not list the station station was carried between List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 5: If you cable system carried the cable system carried the cable system and attion "E" (exempt). For explanation of these the Column 6: Give the cable system and ston "E" (exempt). For explanation of these the Column 6: Give the cable system and ston "E" (exempt). For explanation of these the Column 6: Give the cable system and ston "E" (exempt). For explanation of these the Column 6: Give the cable system and ston "E" (exempt). For explanation of these the Column 6: Give the cable system and ston "E" (exempt). For explanation of these the Column 6: Give the cable system and ston "E" (exempt). For explanation of these the Column 6: Give the cable system and ston "E" (exempt).	G, identify even by stem during the cons in effect or is, as explaine stations: With a CC rules, regular here in space only on a substand also in spatformation concern. In the station's call associated with each case with each each case with each case with each each each each each each each eac	y television start he accounting in June 24, 198 4), or 76.63 (r din the next prespect to any ations, or auth G—but do list titute basis. In the start in the start in the start in a station account in a station account in a station account in the station. Whether the station. Whether the station. Whether the station. Whether the station account in column and the local server in column are basis better in column are basis better in or before Jumitter or an assis on the form of the form of the station. For the station. For the station.	g period, except 81, permitting the referring to 76.6 paragraph. It is a control of the fermion of the referring to 76.6 paragraph. It is a control of the referring to 76.6 paragraph. It is some of the report origination cording to its over the reported in control of the reported in the re	(1) stations carried to carriage of certain (e)(2) and (4))]; as a carried by your context of the special Statement of both on a substitute, see page (v) on program services the television statification, D.C. This work station, an indefor network multicute "E-M" (for noncontions located in the special state of the service of the state of the	es". If not, enter "No". For an ex- e paper SA3 form. estating the basis on which your dering "LAC" if your cable system capacity. expanding the because it is the subject estem or an association representing ery transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. even to which the station is licensed by the	G Primary Transmitters: Television
Note: If you are utilizing				•	which the station is identifed. channel line-up.	
		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	

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. Transmit	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 FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 75.99(t/2) and (4), 76.61(e/2) an	LEGAL NAME OF OWN	NER OF CABLE S'	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, 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, 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 an swoEnders must be reported in column 1 (list each stream separately; for example WETA-Simulcast). **Column 2: List each station or call station across must be reported in column 1 (list each stream separately; for example WETA-Simulcast). **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), "Indicate in each case whether the station is a network station, an independent station, or an oncommercial educational multicast). For the me	City of San Bru	ıno					
Correct 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	PRIMARY TRANSMITT	ERS: TELEVISION	ON				
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SIGN CHANNEL OF (Yes or No) CARRIAGE			CHANN	EL LINE-UP	AP		
	_	CHANNEL	OF	(Yes or No)	CARRIAGE	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
City of San Bru	ıno					
PRIMARY TRANSMITT	ERS: TELEVISION	ON				
In General: In space of carried by your cable is FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Pasis Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream as "WETA-Simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multiper the meaning of the Column 4: If the st planation of local servince Column 5: If you heable system carried the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the Colum	G, identify ever system during to ions in effect of 6.61(e)(2) and (sis, as explaine Stations: With CC rules, regular here in space only on a substand also in spanformation conditions. Ch station's call associated with A-2". Simulcast e channel number see. For example system carried the in each case of entering the lecast), "E" (for nese terms, see ation is outside ice area, see pave entered "Y he distant staticion on a part-itision of a distant tentered into o a primary trans simulcasts, als nee categories e location of each canadian static	y television standard y television y t	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to tit in space I (the ation was carried that basis station report origination cording to its own be reported in origination is a network as assigned to the ation is a network as assigned to the ation is a network as assigned to the ation is a network area, (i.e. "origination is a network area, (i.e. "origination"), origination is a network area, (i.e. "origination is a network area, (i.e. "origination"), origination is a network area, (i.e. "origination"), origin	(1) stations carried to carriage of certal (e)(2) and (4))]; as carried by your of the Special Statement of both on a substitution, see page (v) on program service the er-the-air designation of the television statistical program of the television of the television statistical program of the television of	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your tering "LAC" if your cable system capacity. If payment because it is the subject estem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further end in the paper SA3 form. If the total the station is licensed by the match which the station is identified.	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	
						
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name	
City of San Bru	ino						
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast),							
(for independent multic For the meaning of the Column 4: If the standard of local servi Column 5: If you have cable system carried the distant state For the retransmiss of a written agreement the cable system and attion "E" (exempt). For explanation of these the	cast), "E" (for no see terms, see ation is outside ce area, see pa ave entered "Yine distant static ion on a part-time of a distant of a distant of a primary trans is included in the categories a location of ea Canadian statio	oncommercial page (v) of the the local servage (v) of the es" in column on during the ame basis becar multicast streen or before Jumitter or an action enter "E". If , see page (v) ch station. Forns, if any, given	I educational), of e general instructivice area, (i.e. "congeneral instruction of the country of the general in U.S. stations, is ethe name of the country o	r "E-M" (for nonco ctions located in the distant"), enter "Ye ions located in the mplete column 5, sod. Indicate by ent ictivated channel c insubject to a royalty stween a cable sys senting the primar channel on any of instructions locate list the community me community with	mmercial educational multicast). se paper SA3 form. s.". If not, enter "No". For an expaper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. spayment because it is the subject stem or an association representing y transmitter, enter the designather 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.		
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
City of San Bru	ıno					
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 bas Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Pasis Substitute Basis Subasis under specific FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream 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 multiper the meaning of the Column 5: If you heable system carried the cable system carried the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Column 6: Give the FCC.	G, identify ever system during to ions in effect of 6.61(e)(2) and (sis, as explaine Stations: With CC rules, regular here in space only on a substand also in spanformation conditions. Ch station's call associated with A-2". Simulcast e channel number see. For example system carried the in each case of entering the lecast), "E" (for nese terms, see ation is outside ice area, see pave entered "Y he distant staticion on a part-itision of a distant tentered into o a primary trans simulcasts, als nee categories e location of each canadian static	y television state accounting in June 24, 19 (4), or 76.63 (19 (4), or 76.63 (19 (4), or 76.63 (19 (4)), or	g period, except 81, permitting the referring to 76.6 paragraph. It distant stations for izations: to tit in space I (the station was carried that basis station report origination cording to its own be reported in origination as assigned to sannel 4 in Wash station is a network etwork), "N-M" (I educational), or egeneral instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, (i.e. "or general instructive area, instructive a	(1) stations carried to carriage of certal (e)(2) and (4))]; as carried by your of the Special Statement of both on a substitution, see page (v) on program service the er-the-air designation of the television statistical program of the television of the television statistical program of the television of	es". If not, enter "No". For an ex- expaper SA3 form. estating the basis on which your tering "LAC" if your cable system capacity. If payment because it is the subject estem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further end in the paper SA3 form. If the total the station is licensed by the match which the station is identified.	Primary Transmitters: Television
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1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN		YSTEM:			SYSTEM ID#	Name
City of San Bru	ıno					
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
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(for independent multi For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreemen the cable system and tion "E" (exempt). For explanation of these th Column 6: Give th	cast), "E" (for n ese terms, see ation is outside ice area, see pave entered "Y he distant station on a partiticion of a distant tentered into o a primary trans simulcasts, also ree categories e location of ea Canadian static	oncommercial page (v) of the the local servage (v) of the es" in column on during the eme basis becar multicast streen or before Jumitter or an action enter "E". If , see page (v) ch station. Foons, if any, give	I educational), of general instructivice area, (i.e. "or general instruction 4, you must confuse of lack of a geam that is not some 30, 2009, be association repreyou carried the or of the general in U.S. stations, et the name of the	r "E-M" (for nonco ctions located in the distant"), enter "Ye ons located in the mplete column 5, sod. Indicate by ento ctivated channel of ubject to a royalty tween a cable sys senting the prima channel on any of instructions locate list the community with	mmercial educational multicast). The paper SA3 form. The paper SA3	
Note: If you are utilizing	ng multiple chai		•		channel line-up.	
			EL LINE-UP			
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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LEGAL NAME OF OWNI							
City of San Bru		/STEM:			SYSTEM ID#	Name	
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PRIMARY TRANSMITTE	RS: TELEVISIO	N					
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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.							
		CHANN	EL LINE-UP	AU			
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE	4 DIOTANTO				
	NUMBER	OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
		OF		CARRIAGE	6. LOCATION OF STATION		
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FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN		/STEM:			SYSTEM ID#	Name			
City of San Bru	ino								
PRIMARY TRANSMITTI	ERS: TELEVISIO	ON							
carried by your cable s FCC rules and regulat 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 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	system during the consistence of	ne accounting In June 24, 1984	period, except 81, permitting the referring to 76.6 paragraph. of distant stations orizations: a tit in space I (the stion was carried ute basis station eport origination cording to its own be reported in or as assigned to be annel 4 in Wash ation is a netwo	(1) stations carried carriage of certain (e)(2) and (4))]; as a carried by your cast of a carried by your carried by your cast of a carried by your carr	and low power television stations) and only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program ent and Program Log)—if the sute basis and also on some other as the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- a stream separately; for example con for broadcasting over-the-air in any be different from the channel expendent station, or a noncommercial ast), "I" (for independent), "I-M"	G Primary Transmitters: Television			
For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried the distant stat For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the FCC. For Mexican or Column 1:	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	ng multiple char		·		channel line-up.				
	T	CHANN	EL LINE-UP	AV					
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION				

FORM SA3E. PAGE 3.						,, -
LEGAL NAME OF OV	NER OF CABLE S	YSTEM:			SYSTEM ID#	Name
City of San Br	uno					Nume
PRIMARY TRANSMIT	TERS: TELEVISION	ON				
In General: In space carried by your cable FCC rules and regula 76.59(d)(2) and (4), 5 substitute Basis basis under specific Po not list the station was carrie List the station was carrie List the station here basis. For further in the paper SA3: Column 1: List each multicast strear cast stream as "WET WETA-simulcast). Column 2: Give t its community of lice on which your cable Column 3: Indica educational station, to for independent mul For the meaning of the Column 5: If you cable system carried the distant station for the meaning of the column 5: If you cable system carried carried the distant station "E" (exempt). Fo explanation of these	e G, identify ever system during the ations in effect or 76.61(e)(2) and (asis, as explaine Stations: With FCC rules, regular on here in space of only on a subset, and also in spainformation conform. The ach station's call on associated with FA-2". Simulcast the channel numbers, resulting the letticast), "E" (for not see terms, see station is outside vice area, see picture area, see pic	y television st he accounting in June 24, 194, or 76.63 (i 4), or 76.63 (i 4), or 76.63 (i 4) do 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 h e, WRC is Chane station. whether the station.	g period, except 81, permitting the referring to 76.6 paragraph. I distant stations distributed in the stations are to the sais station report origination cording to its owner be reported in the station is a network of a sassigned to annel 4 in Wash attion is a network, "N-M" (I educational), or egeneral instruct 4, you must con accounting period accou	in (1) stations carried be carriage of certa- 1(e)(2) and (4))]; as a carried by your of the Special Statement of the Spe	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
FCC. For Mexican or Note: If you are utilize				•	n which the station is identifed. channel line-up.	
Trotor ii you are amiz			EL LINE-UP	•	onamier inte up.	
	o BIOACT		1		a LOCATION OF STATION	
1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
0.0.1	NUMBER	STATION	, ,	(If Distant)		
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ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name City of San Bruno 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

FORM SA3E. PAGE 5.								ACCOUNTING	PERIOD: 2019/1
LEGAL NAME OF OWNER OF City of San Bruno	CABLE SYS1	FEM:					S	YSTEM ID#	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEMEN	NT AND PROGRAM LOG	i					ı
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.									Substitute Carriage:
1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? Yes XNo									
Note: If your answer is "No log in block 2.			ge blank. If your answer is '	'Yes," you mι	ust comple	ete the		·	Program Log
period, was broadcast by a under certain FCC rules, re SA3 form for futher informa titles, for example, "I Love L Column 2: If the program Column 3: Give the call Column 4: Give the broathe case of Mexican or Can Column 5: Give the monfirst. Example: for May 7 give Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m."	titute progra ce, please a of every no distant stat gulations, o tion. Do no Lucy" or "NE n was broad sign of the s adcast static atth and day we "5/7." es when the Example: a er "R" if the and regulatio ogramming	am on a separa attach addition nnetwork televion and that your authorization to use general of the addition broadca on's location (the one, if any, the when your system on singular arrivated program carrillisted program ons in effect du	al pages. ision program (substitute pour cable system substitutes. See page (vi) of the gencategories like "movies", or 76ers vs. Bulls." r "Yes." Otherwise enter "Nasting the substitute programe community to which the community with which the tem carried the substitute program was carried by your ged by a system from 6:01: was substituted for programing the accounting period	rogram) that, d for the progeral instruction "basketball". lo." m. station is lice station is ider program. Use cable system. 15 p.m. to 6:2 mming that y; enter the let	during the ramming ons located List special sp	e account another account and the account and	unting ther static e paper ogram C or, in the month ccurately d be required ed pro	h ,	
s	SUBSTITUT	E PROGRAM	1	1 1	EN SUBS			7. REASON	
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY	6.	TIMES		FOR DELETION	
						_			
	 								
						_			
						_			
	 				 				

ACCOUNTING PERIOD: 2019/1 FORM SA3E. PAGE 6.

	LEGAL NAME OF C	OWNER OF CABLE	SYSTEM:							SYS	TEM ID#
Name	City of San I	Bruno									
J Part-Time Carriage Log	PART-TIME CARRIAGE LOG In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period. Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10." State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.— 3:15 a.m. app." You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.— 12:00 p.m."										
			DAT	ES	AND HOURS (OF F	PART-TIME CAR	RIAGE			
	CALL SIGN	WHEN	CARRIAGE OC				CALL SIGN	WHEN	I CARRIAGE OC		ED
		DATE	FROM	UR	ts TO			DATE	FROM	OURS	ТО
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LEG	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name						
Cit	y of San Bruno								
Ins all a (as	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)								
IMF	during the accounting period. PORTANT: You must complete a statement in space P concerning gross receipts.	\$ 543,365.97 (Amount of gross receipts)							
• Cor • Cor • If your fee • If you	YRIGHT ROYALTY FEE uctions: Use the blocks in this space L to determine the royalty fee you owe: mplete block 1, showing your minimum fee. mplete block 2, showing whether your system carried any distant television stations. bour system did not carry any distant television stations, leave block 3 blank. Enter the ar from block 1 on line 1 of block 4, and calculate the total royalty fee. bour system did carry any distant television stations, you must complete the applicable part companying this form and attach the schedule to your statement of account.		L Copyright Royalty Fee						
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b ck 3 below.	e entered on line 1 of							
3 b	art 6 of the DSE schedule was completed, the amount from line 7 of block C should be elow.								
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be entered on line							
Block 1	least the minimum fee, regardless of whether they carried any distant stations. This fee system's gross receipts for the accounting period.	e is 1.064 percent of the							
	Line 1. Enter the amount of gross receipts from space K Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.	\$ 543,365.97							
	This is your minimum fee.	\$ 5,781.41							
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 colun "Yes" in this block. • Did your cable system carry any distant television stations during the accounting periodic Yes—Complete the DSE schedule. No—Leave block 3 below blank and of the 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	nn 4, you must check od?							
3	Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero	0.00							
	Line 3. Add lines 1 and 2 and enter here	\$ -							
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	\$ 5,781.41 0.00	Cable systems submitting additional						
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	0.00	deposits under Section 111(d)(7) should contact the Licensing						
	Line 4. FILING FEE	\$ 725.00	additional fees. Division for the appropriate						
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$ 6,506.41	form for submitting the						
	EFT Trace # or TRANSACTION ID #		additional fees.						
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (general instructions located in the paper SA3 form and the Excel instructions to	. • . ,							

			FUNIVI SAJE, FAGE 0.							
Name	LEGAL NAME OF OWNER OF CAB City of San Bruno	LE SYSTEM:	SYSTEM ID#							
M Channels										
		of channels on which the cable broadcast stations	55							
		of activated channels m carried television broadcast stations es	417							
N Individual to Be Contacted	INDIVIDUAL TO BE CON we can contact about this	TACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual statement of account.)								
for Further Information	Name Bob Aches	on Telephone	650-616-3108							
		ral route, apartment, or suite number)								
	San Bruno, (City, town, state, z									
	Email bac	heson@sanbruno.ca.gov Fax (optional)								
0	CERTIFICATION (This state	ement of account must be certifed and signed in accordance with Copyright Office reg	julations.							
Certifcation	_	certify that (Check one, but only one, of the boxes.) coration or partnership) I am the owner of the cable system as identifed in line 1 of space	≥ B: or							
	_	than corporation or partnership) I am the duly authorized agent of the owner of the cable								
	in line 1 of space B a	and that the owner is not a corporation or partnership; or n an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as or	•							
	in line 1 of space B.	ment of account and hereby declare under penalty of law that all statements of fact contain	•							
		ect to the best of my knowledge, information, and belief, and are made in good faith.								
	X	/S/BOB ACHESON								
	(e.g.,	r an electronic signature on the line above using an "/s/" signature to certify this statement. /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus								
	Туре	ed or printed name: /s/ Bob Acheson								
	Title	: Business Manager (Title of official position held in corporation or partnership)								
	Date	: August 9, 2019								

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

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
City of San Bruno	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement
For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.	Concerning Gross Receipts Exclusion
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?	
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 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
x	
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)	
* 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@copyright.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 filing.	
Owner Address	
First community served	
Accounting period	
ID number	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on 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.

ACCOUNTING PERIOD: 2019/1

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 be all the control of the	

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 or hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

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

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

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

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

Step 2: Divide the result of step 1 by the total number of days in the calendar year (365—or 366 in a leap year). This gives you the 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	of Subscriber Groups	
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
n	A (independent)	1.0		SERVICE AREA OF	FROM SUBSCRIBERS
	B (independent)	1.0	Santa Rosa	Stations A, B, C, D ,E	\$310,000.00
	C (part-time)	0.083	Rapid City	Stations A and C	100,000.00
	D (part-time)	0.139	Bodega Bay	Stations A and C	70,000.00
	E (network)	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: 2019/1

DSE SCHEDULE. PAG	E 11. (CONTINUED)											
4	LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SY	STEM ID#						
1	City of San Bruno											
	SUM OF DSEs OF CATEGOR • Add the DSEs of each station Enter the sum here and in line	٦.			0.00							
2	Instructions: In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column of space G (page 3). In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or nonco											
Computation of DSEs for	mercial educational station, give		2 a5 1.0 , 101	each network of noncom-								
Category "O"			CATEGORY "O" STATION	NS: DSEs								
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE						
Add rows as necessary. Remember to copy all formula into new												
rows.												
						•••••						

	LEGAL NAME OF	OWNER OF CABLE SYSTEM:						S	YSTEM ID#
Name	City of San I	Bruno							
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6	CAPACITY st the call sign of all dista :: For each station, give to correspond with the inform of the call station, give to the call station, give to the call station of the call station	he number of hour mation given in sp. he total number of umn 2 by the figure mal point. This is the station, give the "ty olumn 4 by the figure man 4 by the figure man 4 by the figure man 4 by the figure mation in the station in th	s your cable syste ace J. Calculate o hours that the sta in column 3, and he "basis of carriage pe-value" as "1.0. re in column 5, and	m carried the stanly one DSE for of tion broadcast or give the result in ge value" for the some cach network give the result if the some cach network give the result if the some cach network give the result if	ation during the each station. ver the air during decimals in col station. ork or noncomment in column 6. Ro	g the accounti umn 4. This fi ercial education	ng period. gure must onal station,	
Capacity		C	ATEGORY LA	C STATIONS:	COMPUTAT	ION OF DSE	s		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEN	IR 3. I JRS (ED BY (M (NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	F GE	5. TYPE VALUE	6. DS	
			÷		=				
			÷						
			÷						
			÷						
			÷		<u> </u>				
			÷		_				
			·····			x		·········	
	Add the DSEs	oF CATEGORY LAC Sof each station. Im here and in line 2 of p		ıle,	⊁		0.00		
Computation of DSEs for Substitute-Basis Stations	Was carried tions in effe Broadcast of space I). Column 2: at your option. Column 3: Column 4:	e the call sign of each stand of the call sign of each stand on October 19, 1976 (since or more live, nonnetwork). This figure should correst the number of days Divide the figure in column of the stand of the stan	itution for a progra as shown by the le ork programs during number of live, no spond with the info s in the calendar ye in 2 by the figure in (For more informa)	m that your syster tter "P" in column g that optional carr nnetwork program rmation in space I ear: 365, except in a column 3, and gi ion on rounding, s	n was permitted of 7 of space I); an iage (as shown by as carried in substance a leap year. We the result in casee page (viii) of	to delete under d y the word "Yes" i stitution for prog	FCC rules and an according to the column 2 of a rams that were a to no less the ructions in the	e deleted	m).
		SU	BSTITUTE-BA	SIS STATION	S: COMPUTA	ATION OF D	SEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMB OF PROG		B. NUMBER OF DAYS IN YEAR	4. DSE
			•				÷		=
		÷							
		÷							
		÷	•	=			÷		=
		÷	-	=			÷		=
	Add the DSEs	OF SUBSTITUTE-BAS of each station. Im here and in line 3 of p		ıle,			0.00		
5 Total Number of DSEs	number of DSE: 1. Number o 2. Number o	ER OF DSEs: Give the am s applicable to your system f DSEs from part 2 ● f DSEs from part 3 ● f DSEs from part 4 ●		es in parts 2, 3, and	d 4 of this schedul	e and add them	0	.00 .00 .00	
	TOTAL NUMBE	R OF DSEs							0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2019/1

LEGAL NAME OF (OWNER OF CABLE	SYSTEM:					S'	YSTEM ID#	
City of San Br	uno								Name
-			part 6 and part	7 of the DSE sche	edule blank a	nd complete pa	art 8, (page 16) of	the	6
schedule. If your answer if	"No," complete blo	ocks B and C	below.						
			BLOCK A: 1	ELEVISION M	ARKETS				Computation of
	1981?	e schedule—[aller markets as de				gulations in	3.75 Fee
0.14				IAGE OF PERI					-
Column 1: CALL SIGN	under FCC rules	and regulatione DSE Sche	ons prior to Ju dule. (Note: Tl	part 2, 3, and 4 or ne 25, 1981. For fune letter M below r Act of 2010.)	urther explana	ation of permitt	ed stations, see t	he	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC rt A Stations carri 76.61(b)(c)] B Specialty stati C Noncommeric D Grandfathered instructions for E Carried pursu. *F A station pre	ules and reguled pursuant to as defined cal education (76. or DSE schedant to individually carries JHF station w	ulations cited b to the FCC ma d in 76.5(kk) (7 al station [76.5 65) (see parag dule). ual waiver of F ed on a part-tin vithin grade-B	ne or substitute ba contour, [76.59(d)(ose in effect of 6.57, 76.59(b) e)(1), 76.63(a) e3(a) referrint bstitution of go	n June 24, 198 b), 76.61(b)(c), a) referring to 7 g to 76.61(d) grandfathered s	76.63(a) referring 6.61(e)(1 stations in the		
Column 3:		e stations ide	entified by the I	n parts 2, 3, and 4 etter "F" in column			vorksheet on pag	e 14 of	
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
						-			
			1	l				0.00	
		В	LOCK C: CO	MPUTATION O	F 3.75 FEE				1
Line 1: Enter the	total number of	DSEs from	part 5 of this	schedule				-	
Line 2: Enter the	sum of permitte	ed DSEs from	m block B ab	ove					
Line 3: Subtract (If zero,				r of DSEs subject 7 of this schedu		rate.	<u>.</u>	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	ine 4 by 0.0375	and enter s	um here				x		permited/ partially nonpermitted
Line 6: Enter tot	al number of DS	Es from line	3						carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 aı	nd enter her	e and on line	2, block 3, spac	e L (page 7))		0.00	

ity of San Bı	OWNER OF CABLE	OTOTEW.						YSTEM ID#	Name
		BLOCK	A: TELEVIS	SION MARKETS	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS		1. CALL SIGN	2. PERMITTED BASIS		1	2. PERMITTED BASIS	3. DSE	6
									Computation 3.75 Fee
					• • • • • • • • • • • • • • • • • • • •				
					<u> </u>				
								•••••	
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					l				
		<u> </u>							
									
									

Name	City of San Bru		E SYSTEM:							S	YSTEM ID#	
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981 Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1) Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters											
		PERMITT	ED DSE FOR ST	ATIONS CARRI	ED	ON A	PART-TIME AN	ND SUBSTI	TUTE BASIS			
	1. CALL	2. PRI		COUNTING			BASIS OF		RESENT	6. P	ERMITTED	
	SIGN	DSE		PERIOD		C	ARRIAGE	I	DSE		DSE	
												
								ļ				
												
7 Computation of the Syndicated	-	"Yes," comple	ete blocks B and (locks B and C bla	nk and complete			f the DSE sched					
Exclusivity												
Surcharge	Is any portion of the of	cable system v	within a top 100 ma	jor television ma	rke	t as de	fned by section 7	6.5 of FCC	rules in effect Ju	une 24,	1981?	
	Yes—Complete	blocks B and	d C .				No—Proceed to	part 8				
	DI OOK D. O	omiono of \/II	E/Crada D Canta	n Ctations			DI OCI	/ C. Camari	station of Evens	-+ DCE-		
			F/Grade B Contou		+				tation of Exem	-		
	Is any station listed in commercial VHF stati or in part, over the ca	ion that place				nity s	any station listed erved by the cab mer FCC rule 76	ole system p				
	Yes—List each s	tation below wi	th its appropriate pe	ermitted DSE			Yes—List each st	tation below	with its appropria	ite permi	tted DSE	
	X No—Enter zero a	and proceed to	part 8.			X	No—Enter zero a	ind proceed t	o part 8.			
	CALL SIGN	DSE	CALL SIGN	DSE			CALL SIGN	DSE	CALL SIG	N I	DSE	
	3, 122 31311	552	3, 122 31311	202			2 3.3.1	202	S. ILE GIO			
									-			
								 				
												
			TOTAL DSEs	0.00					TOTAL DS	Es	0.00	

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: City of San Bruno SYSTEM ID#	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE	
Section 1	Enter the amount of gross receipts from space K (page 7)	7
Section 2	A. Enter the total DSEs from block B of part 7	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	Syndicated
	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	Exclusivity Surcharge
• Is any	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 DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	
	A. Enter 0.00599 of gross receipts (the amount in section1)	
	B. Enter 0.00377 of gross receipts (the amount in section.1)	
	C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.	
	A. Enter 0.00599 of gross receipts (the amount in section 1)	
	B. Enter 0.00377 of gross receipts (the amount in section 1)	
	C. Multiply line B by 3.000 and enter here	
	D. Enter 0.00178 of gross receipts (the amount in section 1) ▶ _\$	
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here	
	F. Multiply line D by line E and enter here	
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	
	SECTION 4: SECOND 50 TELEVISION MARKET	
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?	
Section 4a	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 DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	
	B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ \$	
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here	
	D. Multiply line B by line C and enter here	
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge	

	LEGAL NAM	IE OF OWNER OF CABLE SYSTEM: SYSTEM ID#
Name	(City of San Bruno
		•
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.
Computation of the		A. Enter 0.00300 of gross receipts (the amount in section 1) ▶ _\$
Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here
		D. Enter 0.00089 of gross receipts (the amount in section 1) ▶ <u>\$</u>
		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		ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5.
	• In blo	ck A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.
Computation	_	r answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.
of		r answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
Base Rate Fee	blank	
		s a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers partially distant station's local service area and others were located outside that area. For the definition of a station's "local
		e area," see page (v) of the general instructions.
	3011100	area, see page (v) of the general mondetons.
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS
	• Did yo	our 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 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) ▶
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes,"
		use the total number of DSEs from part 5.).
	Section	
	3	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) ▶ _ \$
		B. Enter 0.00701 of gross receipts (the amount in section 1)▶
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here
		D. Multiply line B by line C and enter here
		E. Add lines A, and D. This is your base rate fee. Enter here
		and in block 3, line 1, space L (page 7)
		Base Rate Fee

LEGAL NA	AME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
City of	f San Bruno		Name
Section I	If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 blank.		0
•	A. Enter 0.01064 of gross receipts		8
	(the amount in section 1) ►		
	B. Enter 0.00701 of gross receipts		Computation
	(the amount in section 1) \$		of
	C. Multiply line B by 3.000 and enter here		Base Rate Fee
	D. Enter 0.00330 of gross receipts		
	(the amount in section 1) \(\bigs\)		
	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) Base Rate Fee	0.00	
		0.00	

IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in Space G.

In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this exclusion, you must:

First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. **Finally:** Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system.

NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only.

How to Identify a Subscriber Group for Partially Distant Stations

Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community.

Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.)

Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide.

Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups.

In each section:

- \bullet Identify 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 of the subscribers in the group.
- If:
- 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or,
- 2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, part 6 of this schedule.
- Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.
- Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form.
- Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.

9

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

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name City of San Bruno 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 OWNE City of San Bruno		LE SYSTEM:				S	YSTEM ID#	Name
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	IP		SECONE	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA		uno Municipal Ca		COMMUNITY/ ARE.			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
		-						
					·····			
	·						<u></u>	
Total DSEs	1		0.00	Total DSEs		ļļ.	0.00	
Gross Receipts First G	roup	\$ 543	,365.97	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	JP		FOURTH	SUBSCRIBER GROU	JP	
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 G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	s above.	\$	0.00	

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
				TE FEES FOR EAG				
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computatio			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
						-		Stations
	••••		····		·····	-		Stations
	••••		••••			-		
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
o. 000 . 1000.ptoot	о.оцр				ona oroap	<u>*</u>		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO	OUP		EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····		·····			
••••••	••••		••••			-		
			···			-	<u> </u>	
Γotal 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	
Base Rate Fee Third Base Rate Fee: Add Enter here and in bloo	the base ra	te fees for each sub				\$	0.00	

i					5	YSTEM ID#	Name
			TE FEES FOR EAC				
	SUBSCRIBER GRO				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA		0	COMMUNITY/ ARE	_			
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
SALE GIGIT BOL	O/ IEE OIOIT	502	OF ILLE STOTE	502	O/ILL SIGIY	562	Base Rate Fo
							and
							Syndicated
							Exclusivity
							Surcharge
							for
		<u></u>					Partially Distant
		······································	-				Stations
		···		·····			Stations
		<u> </u>					
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	
ELEVENTH	SUBSCRIBER GRO	UP		TWELVTH	SUBSCRIBER GROU	JP	
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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				····			
		<u>. </u>					
		<mark></mark>					
	H	<u></u>					
		-					
	-	-			+		
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
						1	

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
			<u></u>					Base Rate Fee
						-		Syndicated
			<u></u>		·····			Exclusivity Surcharge
								for
			<u></u>		·····	-		Partially Distant
						-		Stations
						-		
Total DSEs		<u> </u>	0.00	Total DSEs		11	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
						·		
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
FOMMUNITY/ AREA		SUBSCRIBER GRO	OUP 0	COMMUNITY/ ARE		SUBSCRIBER GROU	JP 0	
				J. J				
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	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	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		Syndicated
	·····				·····			Exclusivity Surcharge
								for
								Partially Distant
								Stations
			<u></u>			-		
Total DSEs		<u> </u>	0.00	Total DSEs		!!	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ ARE		SUBSCRIBER GROU)P 0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····			-		
						-		
						-		
						-		
						-		
						 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN City of San Brund		LE SYSTEM:				S	YSTEM ID#	Name
В	LOCK A: (COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
TWEN	ITY-FIRST	SUBSCRIBER GRO	DUP	TWEN	ITY-SECONE	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate F
								and
	···	-	···					Syndicated
								Exclusivity
		-						Surcharge
	<u></u>							for
	<u></u>	-			······			Partially Distant
•••••	···		····		•••••			Stations
	····		····		·····			
	···		····		•••••			
Total DSEs			0.00	Total DSEs	•		0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First 0	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	TY-THIRD	SUBSCRIBER GRO		ii —		I SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····	·	·····			
		-						
	<u></u>			·				
	···		···					
	<u></u>							
	<u> </u>							
			···					
Total DSEs		<u> </u>	0.00	Total DSEs	'		0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ırth Group	\$	0.00	
•	•				•			
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add the Enter here and in blood	he base ra t	te fees for each subs				\$	0.00	

	· COMPLITATION O						Name
TWENTY-FIFT	. COMPUTATION C	F BASE RA	ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
	H SUBSCRIBER GRO	OUP	Ħ		I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA		0	COMMUNITY/ ARE			0	Computation
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate F
			-	·····			and Syndicate
		····	·				Exclusivit
							Surcharg
							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	
TWENTY-SEVENT	H SUBSCRIBER GRO	OUP	TWE	NTY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
······			·				
		····					
Fotal DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
				,			
		0.00	Base Rate Fee Fou	with Caronia	\$	0.00	

LEGAL NAME OF OWNE City of San Bruno		LE SYSTEM:				SY	STEM ID#	Name
				TE FEES FOR EACH				
	TY-NINTH	SUBSCRIBER GROU		Ħ	HIRTIETH	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 Fe
								and
								Syndicated
						<u> </u>		Exclusivity Surcharge
								for
								Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
THIR	TY-FIRST	SUBSCRIBER GROU	JP	THIRTY	-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						 		
							<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
C.000 Recopts Till C	υαμ	•	3.00	Signal Receipts Fourth	Jioup	<u>*</u>	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group	as shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER City of San Bruno	R OF CABL	E SYSTEM:				SY	STEM ID#	Name
				TE FEES FOR EACH				
	Y-THIRD	SUBSCRIBER GROU		Ti .	Y-FOURTH	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
							<u> </u>	Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
							.	
						.	<u> </u>	
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	
	ΓY-FIFTH	SUBSCRIBER GROU	JP	11	RTY-SIXTH	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	
		•			Craun	•		
Gross Receipts Third G	roup	<u>*</u>	0.00	Gross Receipts Fourth	отоир	<u>*</u>	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			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE	R OF CABL	E SYSTEM:				SY	STEM ID#	Name
				TE FEES FOR EACH				
THIRTY-S	EVENTH	SUBSCRIBER GROU		THIR	TY-EIGHTH	SUBSCRIBER GROU	Р	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
		-			<u> </u>			and
							<u></u>	Syndicated
					<u></u>	-	<u></u>	Exclusivity Surcharge
						-	<u></u>	for
•••••		-			<u></u>	-	<u> </u>	Partially
								Distant
								Stations
					<u> </u>	 	<u></u>	
		-			<u> </u>			
							<u></u>	
						<u> </u>	<u></u>	
							<u> </u>	
Total DSEs	<u> </u>		0.00	Total DSEs		II.	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
	Y-NINTH	SUBSCRIBER GROU	JP	Ti .	FORTIETH	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>	-	<u></u>	
						-		
		-			<u>-</u>		<u> </u>	
					<u> </u>	 	<u></u>	
					<mark></mark>		<u></u>	
		-			<u></u>		<u> </u>	
							<u> </u>	
					<u></u>	•	<u> </u>	
Total DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	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.	\$		

LEGAL NAME OF OWNE	R OF CABL	E SYSTEM:				SY	STEM ID#	Name
				TE FEES FOR EACH				
FOR1	Y-FIRST	SUBSCRIBER GROU		FORT	Y-SECOND	SUBSCRIBER GROU	Р	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
					<u>-</u>	-	-	Exclusivity Surcharge
					<u>.</u>		<u>.</u>	for
						-	<u>'</u>	Partially
								Distant
								Stations
					<u>.</u>		<u>.</u>	
					<u>.</u>		<u>.</u>	
Total DSEs	<u> </u>		0.00	Total DSEs		11	0.00	
Gross Receipts First Gr	oun	¢	0.00	Gross Receipts Secon	ıd Group	\$	0.00	
Cross receipts rilet Cr	oup		0.00	Cross receipts ecoor	ia Group	•		
Base Rate Fee First Gr		\$	0.00	Base Rate Fee Secon		\$	0.00	
	Y-THIRD	SUBSCRIBER GROU		11	Y-FOURTH	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>	
					<u>-</u>	+	-	
					•	-		
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					<u>.</u>	-	<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	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER City of San Bruno	R OF CABL	E SYSTEM:				S	/STEM ID#	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	H SUBSCR	RIBER GROUP		
FORT	ΓY-FIFTH	SUBSCRIBER GRO	JP	FO	RTY-SIXTH	SUBSCRIBER GROU	IP	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
					<u></u>			and
								Syndicated
			.			-		Exclusivity
				-	<mark></mark>			Surcharge for
						-		Partially
								Distant
								Stations
					<u></u>			
Total DCCs	<u> </u>		0.00	Total DCFo		Щ	0.00	
Total DSEs				Total DSEs			•	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
FORTY-S	EVENTH	SUBSCRIBER GRO	JP	FOR	TY-EIGHTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
				-	<mark></mark>			
				1		-		
		-			<u></u>	-		
		-	<u>.</u>				<u></u>	
					···		<u></u>	
					•••••••••••••••••••••••••••••••••••••••			
Total DSEs			0.00	Total DSEs	·		0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN City of San Brune		LE SYSTEM:				S	YSTEM ID#	Name
		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	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 Fe
								Syndicated
			<u></u>			-		Exclusivity Surcharge
						-		for
						-		Partially Distant
								Stations
			<u></u>			-	<u></u>	
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		SUBSCRIBER GROU	0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
			····					
		•						
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
		COMPUTATION C SUBSCRIBER GRO	DUP	TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	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 Fe
						-		Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
			<u></u>			-		
			<u></u>			<u> </u>		
Total DSEs		-	0.00	Total DSEs		11	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (\$	0.00	Base Rate Fee Sec		\$	0.00	
FI COMMUNITY/ AREA		SUBSCRIBER GRO	<u>0</u>	COMMUNITY/ ARE		SUBSCRIBER GROU)P	
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 Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNER City of San Bruno	R OF CABL	E SYSTEM:				Sì	/STEM ID#	Name
				TE FEES FOR EACH				
FIFTY-S	EVENTH	SUBSCRIBER GROU		FIF	TY-EIGHTH	SUBSCRIBER GROU	P	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
							<u></u>	Syndicated
						-	<u></u>	Exclusivity Surcharge
				·		-		for
		-			<u></u>	-	<u></u>	Partially
								Distant
								Stations
		-				-		
							<u></u>	
				-			<u></u>	
				·				
Total DSEs	<u> </u>		0.00	Total DSEs		II.	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
							1	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
	Y-NINTH	SUBSCRIBER GROU	JP			SUBSCRIBER GROU	P	
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>	
							<u></u>	
							<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	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.	\$		

BLOCK A: COMPUTATI SIXTY-FIRST SUBSCRIBER COMMUNITY/ AREA CALL SIGN DSE CALL SIGN			TY-SECOND	RIBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA				SUBSCRIBER GROU	JP	
	0	COMMUNITY/ ARE				9
			Α		0	Computatio
	N DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
						Base Rate F
						and
						Syndicated
						Exclusivity
						Surcharge
						for
						Partially Distant
				-		Stations
	······			-		Stations
				-		
Total DSEs	0.00	Total DSEs			0.00	
Gross Receipts First Group \$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
· · · · ·			•	-		
Base Rate Fee First Group \$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-THIRD SUBSCRIBER	RGROUP	SIX	(TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE CALL SIGN	N DSE	CALL SIGN	DSE	CALL SIGN	DSE	
				<u> </u>		
				<u> </u>		
				-		
				 		
				-		
					<u> </u>	
					<u> </u>	
······································	······			1		
Fotal 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	

LEGAL NAME OF OWI City of San Brun		LE SYSTEM:				S	YSTEM ID#	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAG				
		SUBSCRIBER GRO		T		I SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
				0.1220.01				Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
			<mark></mark>				<u></u>	Stations
							<u> </u>	
			····			-	<u></u>	
						+		
	•••••						····	
Total DSEs	•	 	0.00	Total DSEs	<u>.</u>	••	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	
SIXTY	Y-SEVENTH	SUBSCRIBER GRO	OUP	SI	XTY-EIGHTH	I SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
			<mark></mark>					
			····				<u></u>	
	····						<u></u>	
	·····	 	····				<u></u>	
		<u> </u>						
	••••						<u> </u>	
			<u> </u>					
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	I Group	¢	0.00	Base Rate Fee Fou	rth Group	¢	0.00	
Dase Nate Fee HIIIO	Gloup	\$	0.00	Dase Nate Fee FOU	тат Өгөир	\$	0.00	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		RIBER GROUP	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u> </u>		<u></u>					Base Rate Fee
								Syndicated Exclusivity
								Surcharge
								for Partially
								Distant
								Stations
					<u></u>			
						-		
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SEVEN	ITY-FIRST	SUBSCRIBER GRO)UP	SEVEN	ITY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
Total DSEs			0.00	Total DSEs			0.00	
		0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third (Group	\$	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	es above.	\$		

Comp CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base R Synd Exclusion Figure Pari Dis	LEGAL NAME OF OWNER OF CABI City of San Bruno	E SYSTEM:			S	YSTEM ID#	Name	
COMMUNITY/ AREA 0 COMMUNITY/ A	BLOCK A: (COMPUTATION OF BASE	RATE FEES FOR EA	CH SUBSCF	RIBER GROUP			
CALL SIGN DSE CALL SIGN		SUBSCRIBER GROUP	T T		I SUBSCRIBER GROU	JP	9	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base Rate Fee First Group SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA D CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN								
a Synd Excit Surce of the second Group \$ 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP GOMMUNITY/ AREA 0 COMMUNITY/ AREA 0 COMMUNITY/ AREA 0			The state of the s				of	
Synd Exclusion Synd Exclusion Synd Exclusion Synd Exclusion Synd Exclusion Synd Exclusion Synd Synd Exclusion Synd							and	
Exclusion Surce						•••••	Syndicate	
							Exclusivity	
Part Dis Stat Total DSEs				<u></u>			Surcharge	
Dis State							for Partially	
Start St							Distant	
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0							Stations	
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0								
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O Gross Receipts Second Group \$ 0.00 SEVENTY-SIXTH SUBSCRIBER GROUP COMMUNITY/ AREA O COMMUNITY/ AREA O				·····				
Gross Receipts First Group \$ 0.00 Base Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0								
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Total DSEs	0.0	Total DSEs			0.00		
Base Rate Fee First Group \$ 0.00 SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Gross Receipts First Group	\$ 0.0	Gross Receipts Se	cond Group	\$	0.00		
SEVENTY-FIFTH SUBSCRIBER GROUP COMMUNITY/ AREA COMMUNITY/ AREA COMMUNITY/ AREA O COMMUNITY/ AREA O	·		=	·				
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Base Rate Fee First Group	\$ 0.0	Base Rate Fee Se	cond Group	\$	0.00		
	SEVENTY-FIFTH	SUBSCRIBER GROUP	ii i		I SUBSCRIBER GROU	JP		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	COMMUNITY/ AREA		O COMMUNITY/ ARI					
	CALL SIGN DSE	CALL SIGN DS	SE CALL SIGN	DSE	CALL SIGN	DSE		
				·····				
				·····				
······································								
			······					
Total DSEs	Total DSEs	0.0	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	Gross Receipts Third Group	\$ 0.0	Gross Receipts Fo	urth Group	\$	0.00		
	•		$\exists \parallel$	·				
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	Base Rate Fee Third Group	\$ 0.0	Base Rate Fee Fo	urth Group	\$	0.00		

LEGAL NAME OF OWN City of San Brun		LE SYSTEM:				S	YSTEM ID#	Name
				TE FEES FOR EAC			ID.	
SEVENTY COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ ARE		I SUBSCRIBER GROU	JP 0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
OALE GIGIT	BOL	O/LE OIOI4	DOL	O'TEE GIGIT	DOL	O/ LEE OIGHT	BOL	Base Rate Fee
						-		and
						-		Syndicated Exclusivity
								Surcharge
								for
	····					-		Partially Distant
								Stations
						-		
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO				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>			<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
		0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN City of San Brune		LE SYSTEM:				S	YSTEM ID#	Name
E	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
EIGI	HTY-FIRST	SUBSCRIBER GRO	DUP	EIGH	ITY-SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
	····					-		and
	····							Syndicated
						H		Exclusivity Surcharge
	····		····			+		for
	••••	-	••••			<u> </u>		Partially
						-		Distant
								Stations
						<u> </u>		
T / 1 DOF			0.00	T 1 1 DOE			0.00	
Total DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First (iroup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGH	HTY-THIRD	SUBSCRIBER GRO	DUP	EIGH	ITY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u>.</u>							
	••••		••••		•••••	H	····	
						+		
			···			 		
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	
Base Rate Fee: Add Enter here and in bloo	the base ra	te fees for each sub				\$	0.00	

LEGAL NAME OF OWN City of San Brun		LE SYSTEM:				S	YSTEM ID#	Name
[BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0.120.011								Base Rate Fee
								and
								Syndicated
								Exclusivity
						<u> </u>		Surcharge
						<u> </u>		for
								Partially
						-		Distant Stations
			····				<u> </u>	JIANUIIS
						H		
						-		
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
or door to conpice times	O.004				G. Gup			
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIGHTY	-SEVENTH	SUBSCRIBER GRO	DUP	EIG	HTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							<u></u>	
						 		
						 		
	••••		••••					
			<u></u>					
						 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
	1-	<u>·</u>				<u>:</u>		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN City of San Brund		LE SYSTEM:				S	YSTEM ID#	Name
		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	9 Computation			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate Fe
						-		and
								Syndicated Exclusivity
						-	<u> </u>	Surcharge for
								Partially Distant
						-		Stations
						-		
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 G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
NINE	ETY-FIRST	SUBSCRIBER GRO)UP	NINE	TY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	COMMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
						-		
Total DSEs			0.00	Total DSEs			0.00	
		0.00	Gross Receipts Fourth Group \$		\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			scriber group	as shown in the boxe	s above.	\$		

LEGAL NAME OF OWNE	R OF CABL	E SYSTEM:				SY	STEM ID#	Name	
				TE FEES FOR EACH					
	Y-THIRD	SUBSCRIBER GROU		Ti .	Y-FOURTH	SUBSCRIBER GROU		9	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
3.12.5.5.1		0.12201011						Base Rate Fee	
								and	
					<u></u>	-		Syndicated	
					<u></u>	-	<u></u>	Exclusivity	
					<u></u>	-		Surcharge for	
					<u> </u>	-		Partially	
								Distant	
		-						Stations	
		-				-			
					<u> </u>	-			
					-				
					•				
Total DSEs	•		0.00	Total DSEs	•		0.00		
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00		
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
NINE	ΓY-FIFTH	SUBSCRIBER GROU	JP	NIN	ETY-SIXTH	SUBSCRIBER GROU	Р		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	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>			
					<u></u>				
Total DSEs			0.00	Total DSEs		-	0.00		
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00		
Base Rate Fee Third G	roup	\$	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.	\$			

LEGAL NAME OF OWNER City of San Bruno	R OF CABL	E SYSTEM:				S	/STEM ID#	Name
				TE FEES FOR EACH				
NINETY-S	EVENTH	SUBSCRIBER GROU		NINE	TY-EIGHTH	SUBSCRIBER GROU	IP	۵
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<u></u>	-	<u></u>	Syndicated
								Exclusivity
						-		Surcharge for
						-		Partially
		-			<u></u>			Distant
								Stations
	<u> </u>		<u> </u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
NINET	Y-NINTH	SUBSCRIBER GROU	JP	ONE HI	JNDREDTH	SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u></u>			
		-					<u></u>	
						 		
					 	-	<u></u>	
						-		
						 		
								
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	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
ONE HUND	RED FIRST	SUBSCRIBER GRO	DUP	ONE HUNDR	ED SECOND	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA			0	COMMUNITY/ ARE	0	9 Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
					·····			Syndicated
						H	····	Exclusivity Surcharge
	••••		····		·····	-		for
	••••		···		····			Partially
								Distant
								Stations
	<u></u>							
	<u></u>							
Total DSEs			0.00	Total DSEs		H.	0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
•	·				·			
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
		SUBSCRIBER GRO		iii —		SUBSCRIBER GROU		
COMMUNITY/ AREA			O 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	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	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN City of San Brun		LE SYSTEM:				S	YSTEM ID#	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUND	RED FIFTH	SUBSCRIBER GRO	DUP	ONE HUN	DRED SIXTH	SUBSCRIBER GROU	JP	^
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						-		and
					·····			Syndicated
			<u></u>				<u></u>	Exclusivity
						-		Surcharge for
		<u> </u>	···					Partially
	•••••	H	 			-	<u></u>	Distant
	••••		••••					Stations
						-	<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO	DUP	Ti .		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>	
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			···			<u> </u>		
Total DSEs	l		0.00	Total DSEs			0.00	
Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN City of San Brune		LE SYSTEM:				S	YSTEM ID#	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDF	RED NINTH	SUBSCRIBER GRO	DUP	ONE HUND	RED TENTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE			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
			<u></u>					for
		<u> </u>						Partially Distant
	····		 					Stations
	····		···			-	····	Stations
						-		
							<u> </u>	
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 E	ELEVENTH	SUBSCRIBER GRO	DUP	ONE HUNDRE	D TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u></u>			-		
						<u> </u>		
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						-		
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						-	<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	
Base Rate Fee: Add t			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN City of San Brune		LE SYSTEM:				S	YSTEM ID#	Name
E ONE HUNDRED TH				ATE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe and
								Syndicated
					·····			Exclusivity Surcharge
		-						for Partially
								Distant
								Stations
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 F		SUBSCRIBER GRO	0 0	ONE HUNDRED		I SUBSCRIBER GROU	JP 0	
				COMMONT IT ARE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		-						
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	ıπn Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

City of San Brund		LE SYSTEM:				S	YSTEM ID#	Name
				ATE FEES FOR EAC	CH SUBSCF	RIBER GROUP		
ONE HUNDRED SEVE	NTEENTH	SUBSCRIBER GRO		 		I SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
		-	<u> </u>					Syndicated Exclusivity
								Surcharge
		ļ						for
		<u> </u>						Partially Distant
				·				Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	NTEENTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		<u> </u>		-				
		-						
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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 Fou	rth Group	\$	0.00	
Base Rate Fee: Add to			criber group	as shown in the boxe	es above.			
Enter here and in bloc						\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TW	ENTY-FIRST	SUBSCRIBER GRO	DUP	ONE HUNDRED TWE	NTY-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
			<u></u>				<u></u>	and
							<u></u>	Syndicated Exclusivity
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			•••••••••••••••••••••••••••••••••••••••					for
								Partially
							<u></u>	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 TWE	NTY-THIRD	SUBSCRIBER GROU	Р	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		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>	
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						-		
	····					-	<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	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
E	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GROU		1		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
					·····			Exclusivity
								Surcharge
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			···-			-		Stations
	••••	H	••••			-		Otations
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	
NE HUNDRED TWENT		SUBSCRIBER GROU	IP	ONE HUNDRED TW	ENTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
	<mark></mark>				<mark>.</mark>			
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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 Fou	rth Group	\$	0.00	
Total DSEs Gross Receipts Third Base Rate Fee Third Base Rate Fee: Add	Group the base ra t	\$ te fees for each sub-	0.00	Gross Receipts Fou	rth Group	\$ \$	0.00	

LEGAL NAME OF OWN City of San Brund		LE SYSTEM:				S	YSTEM ID#	Name
	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED TWE	NTY-NINTH	SUBSCRIBER GROU	Þ	ONE HUNDRE	ED THIRTIETH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	_
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O'TEE O'O'T	DOL	ONLE CICIV	BOL	ONLE GIGIT	BOL	O'ALL GIGIT	DOL	Base Rate Fee
								and
								Syndicated
								Exclusivity
						-		Surcharge
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			···				<u></u>	Partially Distant
	···		···			-	<u> </u>	Stations
	···		···				<u> </u>	Gtationic
						-		
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	
ONE HUNDRED TH	IRTY-FIRST	SUBSCRIBER GROU	P	ONE HUNDRED THI	RTY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<mark></mark>			-		
	<u></u>		<mark></mark>		·····	-		
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	<mark></mark>		<u></u>			-	<u></u>	
	<u></u>		<u> </u>			-	<u></u>	
			-					
						1		
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.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
		SUBSCRIBER GROU		tt -		I SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
			<u></u>			-		and
								Syndicated Exclusivity
						-		Surcharge
								for
								Partially
								Distant
			<u></u>					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	
		SUBSCRIBER GROU		ii –		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		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			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	
Base Rate Fee: Add Enter here and in blo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED THIRT	Y-SEVENTH	SUBSCRIBER GROU	Р	ONE HUNDRED TH	HIRTY-EIGHTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
07.122.01.01.1	332	07122 07011	302	07.122 07011	202	07.122.01011	302	Base Rate Fee
								and
								Syndicated
								Exclusivity
	<u>.</u>		<u></u>			-		Surcharge
	····					-	<u></u>	for Partially
	····		···				····	Distant
			<u></u>				<u> </u>	Stations
							<u></u>	
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	
		SUBSCRIBER GROU	Р	ONE HUNDRE	D FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		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>			-	<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	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

City of San Bruno	BLE SYSTEM:				5	YSTEM ID#	Nam
	: COMPUTATION C		TE FEES FOR EAC	CH SUBSCR	RIBER GROUP		
ONE HUNDRED FORTY-FIRE	ST SUBSCRIBER GROU		 		SUBSCRIBER GROUP		9
COMMUNITY/ AREA		0	COMMUNITY/ ARE			0	Computa
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate
				·····			and
							Syndica Exclusiv
							Surchar
							for
							Partial
							Distan
							Station
		<u></u>	-		-	·····	
	····	···				····	
Total DSEs		0.00	Total DSEs		-	0.00	
ross Receipts First Group \$ 0.0			Gross Receipts Sec	ond Group	\$	0.00	
						1	
Base Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED FORTY-THIF	D SUBSCRIBER GROU	P	ONE HUNDBED EC				
ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP COMMUNITY/ AREA			ONE HONDINED I C	RIY-FOURIF	SUBSCRIBER GROUP	•	
		0	COMMUNITY/ ARE		I SUBSCRIBER GROUP	0	
	CALL SIGN		ii e		CALL SIGN		
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE		DSE	CALL SIGN	DSE		DSE	
CALL SIGN DSE	CALL SIGN	0.00	COMMUNITY/ ARE CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	
COMMUNITY/ AREA	CALL SIGN	0.00	COMMUNITY/ ARE CALL SIGN Total DSEs	DSE	CALL SIGN	DSE	

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FO	ORTY-FIFTH	SUBSCRIBER GROU	Р	ONE HUNDRED	FORTY-SIXTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>		<u></u>				<u></u>	Base Rate Fee
	·····		<u></u>			-		and Syndicated
	·····		<u></u>					Exclusivity
						-		Surcharge
								for
								Partially
								Distant Stations
	····					-	<u></u>	Stations
			···					
	<u>.</u>							
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 FORT		SUBSCRIBER GROU	Р	ONE HUNDRED F	ORTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<u></u>		<u></u>			-		
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	····					-	<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	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

LEGAL NAME OF OWNE City of San Bruno	R OF CABL	E SYSTEM:				SY	STEM ID#	Name
BL	OCK A: C	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRED	FIFTIETH	SUBSCRIBER GROUP	•	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
					<u>.</u>			Syndicated Exclusivity
							 	Surcharge
								for
								Partially
								Distant
					<u>.</u>			Stations
								
							<u> </u>	
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	
ONE HUNDRED FIFT	Y-FIRST	SUBSCRIBER GROL	JP	ONE HUNDRED FIFT	/-SECOND	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					<u>-</u>		ļ	
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Total DSEs			0.00	Total DSEs			0.00	
	roup	.	,		Croup			
Gross Receipts Third G	roup	<u>*</u>	0.00	Gross Receipts Fourth	і	<u>*</u>	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			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE City of San Bruno	R OF CABL	E SYSTEM:				SY	STEM ID#	Name
				TE FEES FOR EACH				
ONE HUNDRED FIFT	Y-THIRD	SUBSCRIBER GROU				SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
					<u></u>		<u>.</u>	and
						-	<u></u>	Syndicated Exclusivity
					····	-		Surcharge
								for
								Partially
							<u>.</u>	Distant Stations
					···		<u>.</u>	Glations
							<u>.</u>	
						<u> </u>	<u></u>	
Total DSEs	-		0.00	Total DSEs	•		0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED FIFT	ΓY-FIFTH	SUBSCRIBER GROU		Ti .		SUBSCRIBER GROU		
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>	
							0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	<u>\$</u>	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWN		LE SYSTEM:				S	YSTEM ID#	Name
E	BLOCK A: (COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
ONE HUNDRED FIFT	Y-SEVENTH	SUBSCRIBER GROU	IP	ONE HUNDRED	FIFTY-EIGHTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
	<u></u>						<u></u>	Base Rate Fee
 	<mark></mark>		····			-		and Syndicated
	····		····					Exclusivity
	·····		····			-	<u></u>	Surcharge
								for
								Partially
							<u> </u>	Distant
	<u></u>						<u></u>	Stations
	····		····				<u></u>	
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	
		SUBSCRIBER GROU	IP	ONE HUND	RED SIXTIETH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		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 Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in bloo			scriber group	as shown in the boxe	es above.	\$		

В	001/ 4	COMPLITATION		TE EEE0 E00 E * 4	CH CHIDAAD	IDED CDOUD		
		SUBSCRIBER GRO		TE FEES FOR EAC		SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		uno Municipal C		COMMUNITY/ ARE			0	9 Computa
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
0,122 0.0.1	100	07.122 0.011	302	07.122.01011	332	0/122 0.0.1	302	Base Rate
								and
								Syndicate
								Exclusivi
								Surcharg
								for
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								Distant
								Stations
otal DSEs			0.00	Total DSEs			0.00	
		. 54					-	
ross Receipts First G	roup	\$ 543	3,365.97	Gross Receipts Sec	ond Group	\$	0.00	
sase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GRO	UP			SUBSCRIBER GRO	UP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA 0		_		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
otal DSEs			0.00	Total DSEs			0.00	
			0.00	Total DSEs			0.00	
	3roup	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
	Group	\$			rth Group	\$		
Gross Receipts Third (0.00	Gross Receipts Fou			0.00	
ross Receipts Third (\$				\$ \$		
ross Receipts Third (0.00	Gross Receipts Fou			0.00	
Total DSEs Gross Receipts Third (Group	\$	0.00	Gross Receipts Fou	rth Group		0.00	

DI	1							
DI		COMPUTATION O SUBSCRIBER GRO		TE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
O/ LEE OF OF T	BOL	O/ ILL STORY	502	OF ILLE STORY	502	O'ALL GIGIT	DOL	Base Rate
								and
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		-	<u></u>					Surcharg
	<u> </u>	-	<u></u>			-		for Partially
			<u></u>					Distant
		-				+	••••	Stations
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	<u>.</u>							
Fotal DSEs	1		0.00	Total DSEs		Ц	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$		
orodo recoupto i not c	топр		0.00	Cross recorpts occ	ona Oroup	<u>*</u>	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
	SEVENTH	SUBSCRIBER GRO)UP		EIGHTH	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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				1.1				
Fotal DSEs			0.00	Total DSEs			0.00	
Fotal DSEs Gross Receipts Third (Group	\$	0.00	Total DSEs Gross Receipts Fou	rth Group	\$	0.00	
	Group	\$			rth Group	\$	•	
		\$				\$	•	

								Name
		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		RIBER GROUP I SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE		- COBOONIBLIX ONO	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
O' LEE GIGIT	502	O'ALL GIGIT	502	OF ILLE STOTE	502	O/ IEE OIOIT	502	Base Rate
								and
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					·····			Surcharg for
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			···		••••			
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	
					T\\(\(\tau\)\(\tau\)	I CLIDOODIDED ODO	. IID	
		SUBSCRIBER GRO		COMMUNITY/ADE		SUBSCRIBER GRO	_	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		11		
			DOL	07.00	DSE	CALL SIGN	DSE	
			BOL		DSE	CALL SIGN	DSE	
			BOL	0,122 0,011	DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
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					DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
					DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs	DSE	CALL SIGN	0.00	
	Group	\$				S CALL SIGN		
Total DSEs Gross Receipts Third	Group	\$	0.00	Total DSEs			0.00	
		\$	0.00	Total DSEs	rth Group		0.00	

LEGAL NAME OF OWNER City of San Bruno	R OF CABL	E SYSTEM:				S	YSTEM ID#	Name
BL	OCK A: 0	COMPUTATION O	F BASE RA	TE FEES FOR EACH	H SUBSCF	RIBER GROUP		
THIR	TEENTH	SUBSCRIBER GRO	UP	FO	URTEENTH	SUBSCRIBER GROU	JP	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
			<u> </u>					Surcharge
			<u></u>					for
			<mark></mark>					Partially
			<mark></mark>				<u></u>	Distant
		-	<mark></mark>		<u></u>		<u></u>	Stations
			<mark></mark>					
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			. 				<u> </u>	
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Total DSEs			0.00	Total DSEs		1	0.00	
Gross Receipts First Gr	oup	\$ 0.00		Gross Receipts Seco				
							1	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
FIF	TEENTH	SUBSCRIBER GRO	UP		SIXTEENTH	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>		<u></u>		<u></u>	
Total DSEs			0.00	Total DSEs			0.00	
		•			de Cuerre	•		
Gross Receipts Third G	roup	<u>\$</u>	0.00	Gross Receipts Fourt	n Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE City of San Bruno	R OF CABI	LE SYSTEM:	·			SY	STEM ID#	Name
				TE FEES FOR EACH				
	ITEENTH	SUBSCRIBER GROU			HTEENTH	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
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	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	
NIN	ITEENTH	SUBSCRIBER GROU	JP	T\	WENTIETH	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Froup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00	
	. 2017	·			. 2.0up	-		
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
		te fees for each subsc space L (page 7)	riber group	as shown in the boxes	above.	\$		

		S					R OF CABL	City of San Bruno
		IBER GROUP	SUBSCR	TE FEES FOR EAC	BASE RA	COMPUTATION OF	OCK A: (Bl
<u> </u>		SUBSCRIBER GROU	-SECOND			SUBSCRIBER GRO	TY-FIRST	
0 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fee								
and								
Syndicated								
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for		-					 	
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<u>)</u>	0.00		<u>-</u>	Total DSEs	0.00		-	Total DSEs
<u>) </u>	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
0	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	roup	Base Rate Fee First G
	UP	SUBSCRIBER GROU	/-FOURTH	TWENT	UP	SUBSCRIBER GRO	ry-third	TWEN
0	0			ll	0			COMMUNITY/ AREA
				COMMUNITY/ AREA				
. <u></u>	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE	CALL SIGN
<u></u>		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
<u></u>		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
 :		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
 <u>-</u>		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
 E		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
======================================		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
 E		CALL SIGN	DSE		DSE	CALL SIGN	DSE	CALL SIGN
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		CALL SIGN	DSE		DSE	CALL SIGN	DSE	
	DSE	CALL SIGN		CALL SIGN		CALL SIGN		Total DSEs Gross Receipts Third C

SYSTEM ID# Name			•	LE SYSTEM:		LEGAL NAME OF OWNE City of San Bruno
EES FOR EACH SUBSCRIBER GROUP						
TWENTY-SIXTH SUBSCRIBER GROUP MMI INITY/ AREA 0	NTY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
Computation		COMMUNITY/ AREA	0			COMMUNITY/ AREA
		CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fee						
and				-		
Syndicated	<u>.</u>					
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for	<u>-</u>			-		
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al DSEs 0.00		Total DSEs	0.00			Total DSEs
ss Receipts Second Group \$ 0.00	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
se Rate Fee Second Group \$ 0.00	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
TWENTY-EIGHTH SUBSCRIBER GROUP	Y-EIGHTH	TWENT	JP	SUBSCRIBER GRO	SEVENTH	TWENTY-S
MMUNITY/ AREA		COMMUNITY/ AREA	0			COMMUNITY/ AREA
ALL SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
	<u>.</u>					
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		Total DSEs	0.00			Total DSEs
al DSEs 0.00						
al DSEs 0.00 ss Receipts Fourth Group \$ 0.00	Group	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

OMPUTATION OF I)	TE FEES FOR EACH		RIBER GROUP I SUBSCRIBER GROU	ID.	
DUBOURIBER GRUUI		<u> </u>	THIRTH			
	0	COMMUNITY/ AREA		SUBSCRIBER GRUC)P 0	9
OALL GION	DOE	OALL CION	T por	TI OALL CION		Computati
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate
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			<u> </u>			Surcharg
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			<u>-</u>	-	····	Stations
			<u></u>			
			<u>-</u>			
	0.00	Total DSEs			0.00	
\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
SUBSCRIBER GROUP)	THIRT	Y-SECOND	SUBSCRIBER GROU	JP	
	0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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	0.00	Total DSEs		Ш	0.00	
\$			h Group	\$	0.00	
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\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00	
		<u> </u>				
	CALL SIGN CALL SIGN	\$ 0.00 \$ 0.00 CALL SIGN DSE CALL SIGN DSE 0.00 0.00 \$ 0.00 \$ 0.00	\$ 0.00 Base Rate Fee Secon CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN Total DSEs 0.00 Gross Receipts Secon	\$ 0.00 Base Rate Fee Second Group THIRTY-SECOND COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Total DSEs Gross Receipts Second Group THIRTY-SECOND COMMUNITY/ AREA Base Rate Fee Second Group Total DSEs Gross Receipts Second Group Thirty-SECOND COMMUNITY/ AREA Base Rate Fee Second Group Total DSE Gross Receipts Fourth Group Base Rate Fee Fourth Group Base Rate Fee Fourth Group	\$ 0.00 Base Rate Fee Second Group THIRTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN S O.00 Total DSEs Gross Receipts Fourth Group \$	\$ 0.00 Base Rate Fee Second Group \$ 0.00

							,	City of San Bruno
	ID.			TE FEES FOR EACH				
9	JP 0	SUBSCRIBER GROU	′-FOURTH	THIRTY COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	IY-IHIRD	THIRT COMMUNITY/ AREA
Computa				COMMONT IT AIREA				OOMNONT IT AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate							 	
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	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
		 \$						
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	JP			THIF	JP			THIR
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	RTY-SIXTH	THII COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR'
	DSE	SUBSCRIBER GROU	RTY-SIXTH	CALL SIGN	JP 0	SUBSCRIBER GROU	RTY-FIFTH	THIR COMMUNITY/ AREA CALL SIGN
	DSE DSE O.00	SUBSCRIBER GROU	DSE	THIE COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	SUBSCRIBER GROU	DSE	THIR COMMUNITY/ AREA CALL SIGN Fotal DSEs
	DSE	SUBSCRIBER GROU	DSE	CALL SIGN	JP 0	SUBSCRIBER GROU	DSE	THIR COMMUNITY/ AREA CALL SIGN Fotal DSEs
	DSE DSE O.00	SUBSCRIBER GROU	DSE Group	THIE COMMUNITY/ AREA CALL SIGN Total DSEs	DSE O.00	CALL SIGN	DSE OF OTHER DESCRIPTION OF THE PROPERTY OF TH	THIR'

LEGAL NAME OF OWNE City of San Bruno	R OF CABI	LE SYSTEM:	•			SY	STEM ID#	Name
				TE FEES FOR EACH				
	EVENTH	SUBSCRIBER GROU			Y-EIGHTH	SUBSCRIBER GROUI		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
						-		Surcharge for
						-	<u> </u>	Partially
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								Stations
								
							 	
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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		\$	0.00	
THIRT	Y-NINTH	SUBSCRIBER GROU	JP		FORTIETH	SUBSCRIBER GROUI	D	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
								
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	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 ea		<u>'</u>	as shown in the boxes a	· .	\$	0.00	

Name	STEM ID#	SY			•	LE SYSTEM:		LEGAL NAME OF OWNE City of San Bruno
				TE FEES FOR EACH				
9	0	SUBSCRIBER GROU	-SECOND	COMMUNITY/ AREA	JP 0	SUBSCRIBER GROU	TY-FIRST	FORT
Computation	Dec			CALL SICN	Dec			CALL SIGN
of Base Rate Fe	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	Base Rate Fee First Gr
	FORTY-FOURTH SUBSCRIBER GROUP					SUBSCRIBER GROU	TY-THIRD	FORT
	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	Gross Receipts Fourth	0.00	\$	Group	Gross Receipts Third G

Base Rate Fo	RIBER GROUP			TE FEES FOR EACH	BASE RA		0014 4 . 4	
Computatio of Base Rate Fe and Syndicated Exclusivity Surcharge		H SUBSCRIBER	TY ON THE					
Computatio of Base Rate Fe and Syndicated Exclusivity Surcharge	0		RIY-SIXIH			SUBSCRIBER GROU	Y-FIFTH	
Base Rate Fe and Syndicated Exclusivity Surcharge				COMMUNITY/ AREA	0			COMMUNITY/ AREA
and Syndicated Exclusivity Surcharge	L SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge								
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<u>u</u>	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	oup	Gross Receipts First Gr
0	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	RIBER GROUP	H SUBSCRIBER	Y-EIGHTH	FORT	JP	SUBSCRIBER GROU	EVENTH	FORTY-S
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
<u></u>	L SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
								
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<u>-</u>	0.00	\$	Gloup	Gross Receipts Fourth	J.00	\$	ισαρ	Oloss Necelbis IIIII G
0	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	roup	Base Rate Fee Third G

Name	STEM ID#	SY			•	LE SYSTEM:	R OF CABL	LEGAL NAME OF OWNE City of San Bruno
	ID.			TE FEES FOR EACH				
9	0	SUBSCRIBER GROU	FIFTIETH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	Y-NIN I H	COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fe	502	O'ALL GIGIT	DOL	O, LE OTOTA	BOL	O' LEE GIGIT	DOL	O, ILL O'O'I
and						 		
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	0.00	_		Total DSEs	0.00			Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	-SECOND	FIFTY	JP	SUBSCRIBER GROU	TY-FIRST	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		I	Total DSEs	0.00			Total DSEs
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	0.00	\$	Group	Gross Receipts Fourth	0.00	\$	iroup	Gross Receipts Third G

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	D SUBSCRIBER GRO				SUBSCRIBER GRO	UP	_
COMMUNITY/ AREA		0	COMMUNITY/ ARE	Α		0	9 Compute
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computat of
							Base Rate
							and
							Syndicate
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<mark></mark>							Surcharg
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otal DSEs		0.00	Total DSEs	•	•	0.00	
ross Receipts First Group	¢	0.00	Gross Receipts Sec	and Group	¢	0.00	
iloss Receipts Filst Gloup	\$	0.00	Gloss Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
EIETV EIET	'H SUBSCRIBER GRO) I I D		EIETV QIVTU	SUBSCRIBER GRO	IID.	
	H SUBSCRIBER GRO		li	FIFTI-SIATH	SUBSCRIBER GRO	UF	
OMMUNITY/ AREA				٨		0	
		0	COMMUNITY/ ARE	Α		0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
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CALL SIGN DSE	CALL SIGN				CALL SIGN		
CALL SIGN DSE	CALL SIGN				CALL SIGN		
	CALL SIGN				CALL SIGN		
otal DSEs	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN DSE		DSE	CALL SIGN Total DSEs	DSE		DSE	
Total DSEs		DSE	CALL SIGN Total DSEs	DSE		DSE	

Name	STEM ID#	Sì				LE SYSTEM:		LEGAL NAME OF OWNE City of San Bruno
	D	IBER GROUP SUBSCRIBER GROU		TE FEES FOR EACH		COMPUTATION OF SUBSCRIBER GRO		
9 Computation	0	SUBSCRIBER GROU	T-EIGHTH	COMMUNITY/ AREA	0	30B3CRIBER GRO		COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fee								
and		-						
Syndicated Exclusivity							<u> </u>	
Surcharge								
for						 		
Partially Distant								
Stations								
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		•		***************************************			<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
	Р	SUBSCRIBER GROU	SIXTIETH		JP	SUBSCRIBER GRO	TY-NINTH	FIFT
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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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

9 Computation		IBER GROUP	CLIDCCDI					
_				TE FEES FOR EACH				
_		SUBSCRIBER GROUP	-SECOND			SUBSCRIBER GROU	Y-FIRST	
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F								
and								
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	0.00	· ·		Total DSEs	0.00	-		Total DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
_	JP	SUBSCRIBER GROUP	-FOURTH	SIXTY	JP	SUBSCRIBER GROU	Y-THIRD	SIXT
	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	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G
	0.00	\$	Group	Base Rate Fee Fourth	0.00	\$	roup	Base Rate Fee Third G

CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations Total DSEs Gross Receipts Second Group SIXTY-EIGHTH SUBSCRIBER GROUP	Y-SIXTH					City of San Bruno
COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations Computation Syndicated Exclusivity Surcharge for Partially Distant Stations Stations Computation Syndicated Exclusivity Surcharge for Partially Distant Stations		II SIX				
CALL SIGN DSE CALL SIGN DSE Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations Fotal DSEs Gross Receipts Second Group SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA O Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations		COMMUNITY/ AREA	0	SUBSCRIBER GROU	I Y-FIF I H	COMMUNITY/ AREA
Base Rate Fe and Syndicated Exclusivity Surcharge for Partially Distant Stations Total DSEs O.00 Sross Receipts Second Group SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA O	DSE		DSE	CALL SIGN	DSE	CALL SIGN
Syndicated Exclusivity Surcharge for Partially Distant Stations Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0	DOL	O/ILL GIGIT	562	O' LEE O'O'T	BOL	O/ILL OIGH
Exclusivity Surcharge for Partially Distant Stations Total DSEs Gross Receipts Second Group \$ 0.00 SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				-		
Surcharge for Partially Distant Stations Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0						
for Partially Distant Stations Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				<u> </u>		
Total DSEs Gross Receipts Second Group Base Rate Fee Second Group \$ 0.00 SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0				-		
Total DSEs 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0						
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SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0		Total DSEs	0.00			Total DSEs
SIXTY-EIGHTH SUBSCRIBER GROUP COMMUNITY/ AREA 0	Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
COMMUNITY/ AREA	Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	EIGHTH	SIXT	JP	SUBSCRIBER GROU	SEVENTH	SIXTY-S
CALL SIGN DSE CALL SIGN DSE		COMMUNITY/ AREA	0			COMMUNITY/ AREA
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Total DSEs 0.00		Total DSEs	0.00		l	Total DSEs
Gross Receipts Fourth Group \$ 0.00		Gross Pacaints Fourth	0.00	\$	Group	Gross Receipts Third G
Base Rate Fee Fourth Group \$ 0.00	roup	Gross Receipts Fourti				

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9		SUBSCRIBER GROU	VENTIETH			SUBSCRIBER GROU	TY-NINTH	
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	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	•	\$ SUBSCRIBER GROU				SUBSCRIBER GROU		
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 - - - -	JP			SEVENT	UP			SEVEN
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0 DSE	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA CALL SIGN
	JP 0	SUBSCRIBER GROU	'-SECOND	SEVENT COMMUNITY/ AREA	UP 0	SUBSCRIBER GROU	ITY-FIRST	SEVEN COMMUNITY/ AREA
	JP 0 DSE	SUBSCRIBER GROU	DSE	SEVENT COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROU	DSE DSE	SEVEN COMMUNITY/ AREA CALL SIGN

LEGAL NAME OF OWNE City of San Bruno	R OF CABL	LE SYSTEM:				S	YSTEM ID#	Name
				TE FEES FOR EACH				
	Y-THIRD	SUBSCRIBER GRO			Y-FOURTH	SUBSCRIBER GROU	JP	9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
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								Syndicated
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Total DSEs			0.00	Total DSEs	-		0.00	
Gross Receipts First G	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	
SEVEN'	TY-FIFTH	SUBSCRIBER GRO	UP	SEVE	NTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
0,122 0.0.1	202	07.122 0.011	202	07.122 0.0.1	202	07.22 0.0.1	302	
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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	
se Rate Fee: Add ther here and in block			criber group	as shown in the boxes a	above.	\$		

Name								City of San Bruno
	ID			TE FEES FOR EACH				
9)P	SUBSCRIBER GROU	r-EIGHTH	COMMUNITY/ AREA	0	SUBSCRIBER GROU	DEVENIH	SEVENTY-S COMMUNITY/ AREA
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Name	STEM ID#	Sì				_E SYSTEM:	R OF CABL	City of San Bruno
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Name	STEM ID#							City of San Bruno
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Nonpermitted 3.75 Stations

LEGAL NAME OF OWNE City of San Bruno	R OF CABL	LE SYSTEM:	-			Sì	STEM ID#	Name
		COMPUTATION OF SUBSCRIBER GROU		TE FEES FOR EACH		IBER GROUP SUBSCRIBER GROU	P	
COMMUNITY/ AREA	DFIRST	SUBSCRIBER GROC	0	COMMUNITY/ AREA	, SECOND	SUBSCRIBER GROU	0	9
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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	
3ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
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COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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3ase Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
roup			0.00		Group	\$	0.00	

Nonpermitted 3.75 Stations

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COMMUNITY/ AREA O COMMUNITY/ AREA	BLOCK A:	OMPUTATION OF BASE RAT	TE FEES FOR EACH SUB	SSCRIBER GROUP	
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Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
ONE HUNDRED EI	EVENTH	SUBSCRIBER GROU	JP	ONE HUNDRED	TWELVTH	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	1	П	0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee Third G Base Rate Fee: Add th Enter here and in block	e base rat	re fees for each subsc		Base Rate Fee Fourth		\$	0.00	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNE City of San Bruno	R OF CABI	LE SYSTEM:				SY	STEM ID#	Name
				TE FEES FOR EACH				
ONE HUNDRED THIR	TEENTH	SUBSCRIBER GROU			RTEENTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							ļ	Base Rate Fee
								and
								Syndicated Exclusivity
							 	Surcharge
						-		for
								Partially
								Distant
								Stations
								
							 	
							 	
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Total DSEs	<u> </u>		0.00	Total DSEs	ļ		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	
ONE HUNDRED FIF	TEENTH	SUBSCRIBER GROU	IP	ONE HUNDRED SI	XTEENTH	SUBSCRIBER GROUP)	
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	ı		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	
se Rate Fee: Add the ter here and in block			riber group	as shown in the boxes a	ibove.	\$		

	BLE SYSTEM:					YSTEM ID#	Name
			TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED SEVENTEENT	H SUBSCRIBER GROU	Р	ONE HUNDRED E	IGHTEENTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
							Base Rate Fe
							and
							Syndicated
							Exclusivity
							Surcharge
							for
				<u> </u>			Partially
				. 			Distant
				<u></u>	-		Stations
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				<u>-</u>	1		
		···		<u> </u>	1		
Total DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Secor	nd Group	\$	0.00	
Base Rate Fee First Group	\$	0.00				0.00	
	Ψ	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED NINTEENT					SUBSCRIBER GRO		
·							
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	DUP	ONE HUNDRED TO		SUBSCRIBER GRO	UP	
ONE HUNDRED NINTEENT		0 0	ONE HUNDRED T	WENTIETH		UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT COMMUNITY/ AREA CALL SIGN DSE	H SUBSCRIBER GRO	0 0	ONE HUNDRED TO	WENTIETH	SUBSCRIBER GRO	UP 0	
ONE HUNDRED NINTEENT	H SUBSCRIBER GRO	DUP DSE	ONE HUNDRED TO COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GRO	DSE	

							er of Cabl	City of San Bruno
				TE FEES FOR EACH				
9		SUBSCRIBER GROUP	TY-SECOND	ONE HUNDRED TWEN		SUBSCRIBER GROUP	NTY-FIRST	ONE HUNDRED TWEN
Computat	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate								
and						-		
Syndicate								
Exclusivi Surcharg	····		······································		-			
for		_				-		
Partially								
Distant		_						
Stations						-		
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	0.00			Total DSEs	0.00			Fotal DSEs
	0.00	\$	nd Group	Gross Receipts Seco	0.00	\$	roup	Gross Receipts First G
			·					•
	0.00	\$	d Group	Base Rate Fee Seco	0.00	\$	roup	Base Rate Fee First G
		SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED TWEN)	SUBSCRIBER GROUP	ITY-THIRD	ONE HUNDRED TWEN
	0				_			
				COMMUNITY/ AREA	0			COMMUNITY/ AREA
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
		CALL SIGN	DSE			CALL SIGN	DSE	
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		IDED ODOUG	CLIDCOD	TE EEEO EOO E * 0'	DAGEDA	COMPUTATION	1.001/ 4. 1	
	1	SUBSCRIBER GROUP		TE FEES FOR EACH		SUBSCRIBER GROUP		
9 Computati	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computati of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate	202	07.22 0.011	302	07.122.07077	202	07.122 01011	332	0,120.0.1
and								
Syndicate								
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for						-		
Partially Distant								
Stations		-						
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	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	Group	ross Receipts First G
		·						
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	ase Rate Fee First G
		\$ SUBSCRIBER GROUP			'			
					'	SUBSCRIBER GROUP		ase Rate Fee First G HUNDRED TWENTY OMMUNITY/ AREA
	,			ONE HUNDRED TWEN				E HUNDRED TWENTY
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	HUNDRED TWENTY
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY OMMUNITY/ AREA
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY OMMUNITY/ AREA
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY OMMUNITY/ AREA
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY OMMUNITY/ AREA
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY OMMUNITY/ AREA
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY OMMUNITY/ AREA
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY OMMUNITY/ AREA
	0	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN	0	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY
	DSE	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED TWEN COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROUP	'-SEVENTH	E HUNDRED TWENTY OMMUNITY/ AREA CALL SIGN
	0 DSE	SUBSCRIBER GROUP CALL SIGN	DSE	ONE HUNDRED TWEN COMMUNITY/ AREA CALL SIGN Total DSEs	0 DSE	CALL SIGN	DSE DSE	CALL SIGN CALL SIGN Data DSEs
	DSE	SUBSCRIBER GROUP	DSE	ONE HUNDRED TWEN COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROUP	DSE DSE	E HUNDRED TWENTY OMMUNITY/ AREA

	BLE SYSTEM:					YSTEM ID#	Name
			TE FEES FOR EACH	H SUBSCR	IBER GROUP		
ONE HUNDRED TWENTY-NINTI	SUBSCRIBER GROUI				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 Fe
							and
						<u></u>	Syndicated
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							Surcharge
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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 THIRTY-FIRS	T SUBSCRIBER GROU	Р	ONE HUNDRED THIR	TY-SECOND	SUBSCRIBER GROUP)	
COMMUNITY/ AREA			II				
OOMINIONITI / AREA		0	COMMUNITY/ AREA			<u> </u>	
COMMONTLY/ AREA	CALL SIGN	DSE	COMMUNITY/ AREA	DSE	CALL SIGN	DSE	
	CALL SIGN				CALL SIGN		
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CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	

						City of San Bruno
BASE RATE FEES FOR EACH SUBSCRIBER GROUP		r i				
ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP COMMUNITY/ AREA O	Y-FOURTH			SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED THIS COMMUNITY/ AREA
DSE CALL SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		Total DSEs	0.00			otal DSEs
0.00 Gross Receipts Second Group \$ 0.00	id Group	Gross Receipts Secon	0.00	\$	Group	Gross Receipts First G
0.00 Base Rate Fee Second Group \$ 0.00	d Group	Base Rate Fee Secon	0.00	\$	Group	sase Rate Fee First G
	RTY-SIXTH	İ		SUBSCRIBER GROU	RTY-FIFTH	
0 COMMUNITY/ AREA 0		COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE CALL SIGN DSE CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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0.00 Total DSEs 0.00		Total DSEs	0.00			otal DSEs
0.00 Total DSEs 0.00 0.00 Gross Receipts Fourth Group \$ 0.00	ı Group			\$	Group	
	n Group			\$	Group	otal DSEs Gross Receipts Third (

LEGAL NAME OF OWNE City of San Bruno	R OF CABL	LE SYSTEM:				S	YSTEM ID#	Name
				TE FEES FOR EACH	SUBSCR	IBER GROUP		
ONE HUNDRED THIRTY-	SEVENTH	SUBSCRIBER GROUP	•	ONE HUNDRED THIR	TY-EIGHTH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
		-						and
								Syndicated
								Exclusivity
								Surcharge
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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	
ONE HUNDRED THIRT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRED	FORTIETH	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 Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group	as shown in the boxes	above.	\$		

	D# Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	
DRED FORTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP	
// AREA O COMMUNITY/ AREA	O Computation
I DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
	Base Rate Fe
	and
	Syndicated
	Exclusivity
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	for Partially
	Distant
	Stations
	0
ots First Group \$ 0.00 Gross Receipts Second Group \$ 0.00	0
ee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.00	0
DRED FORTY-THIRD SUBSCRIBER GROUP ONE HUNDRED FORTY-FOURTH SUBSCRIBER GROUP	
// AREAO COMMUNITY/ AREA	
I DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
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0.00 Total DSEs 0.00	
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					LE SYSTEM:	R OF CABL	LEGAL NAME OF OWNE City of San Bruno
	BER GROUP	SUBSCR	TE FEES FOR EACH	BASE RA	COMPUTATION OF	OCK A: (BL
	SUBSCRIBER GROUP	RTY-SIXTH			SUBSCRIBER GROUP	RTY-FIFTH	ONE HUNDRED FOR
0 Computation			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE of		DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate Fee							
and							
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Surcharge					-		
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0.00	0.0	!	Total DSEs	0.00		<u> </u>	Total DSEs
0.00	\$ 0.0	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First Gr
0.00	\$ 0.0	d Group	Base Rate Fee Secon	0.00	\$	oup	Base Rate Fee First Gr
	SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED FOR		SUBSCRIBER GROUP	SEVENTH	ONE HUNDRED FORTY-
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE	CALL SIGN DS	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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0.00	0.0	1	Total DSEs	0.00			Total DSEs
		Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third G
0.00	\$ 0.0		i i				
0.00	\$ U.U						

LEGAL NAME OF OWNE City of San Bruno	R OF CABL	E SYSTEM:	•			SY	STEM ID#	Name
BL	OCK A: 0	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCF	RIBER GROUP		
ONE HUNDRED FORT	Y-NINTH	SUBSCRIBER GROU	JP	ONE HUNDRED	FIFTIETH	I SUBSCRIBER GROU)	•
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		<u>II</u>	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 FIFT	Y-FIRST	SUBSCRIBER GROU	JP	ONE HUNDRED FIFTY	'-SECONE	SUBSCRIBER GROU	ס	
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	1		0.00	
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Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fourth	Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group	as shown in the boxes a	above.	\$		

YSTEM ID#	Sì			•	LE SYSTEM:		LEGAL NAME OF OWNE City of San Bruno
IP							
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	\$	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
	SUBSCRIBER GROU	FTY-SIXTH			SUBSCRIBER GRO	TY-FIFTH	
<u>U</u>			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name City of San Bruno BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you mustalso compute a 9 Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market Base Rate Fee **INSTRUCTIONS:** Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for **Partially** Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show **Stations** your actual calculations on this form. ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group Second Group ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation computation SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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

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C	Ca Wo	ble rksheet	Total amount of remittance	Nur	mber of SAs rec'd	I	nitials
			Date of remittance	Check	EFT	FIL	ING FEES
Cable ID#						Amount	Initials
Examined by		Reviewed by	Date examination completed	Allocatio	on number		
Space A Accounting Period			-				
	Ja	nuary 1 - June 30, 2017	_	July 1 - Dec	ember 31, 2017		
	Le	tter sent		Information	received		
	Ac	cepted]	Phone call/E	Date/Contact		
Space B Owner							
	Le	tter sent]	Information	received		
	Ac	cepted]	Phone call/E	Date/Contact		-
Space D Area Served							
	Le	tter sent		Information	received		
	Ac	cepted	_ [Phone call/E	Date/Contact		
Space E Secondary Transission							
Service Subscribers:	Le	tter sent]	Information	received		
and Rates	☐ Ac	cepted	[Phone call/D	Date/Contact		
Space G Primary Transmitters:							
Television	Le	tter sent		☐ Information received			
	☐ Ac	cepted		Phone call/[Date/Contact		
Space H Primary Transmitters:							
Radio	Ac	cepted		Phone call/[Date/Contact		

Space I Substitute

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