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						
2/28/2022	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCOUNTING PERIOD COVERED BY THIS STATEMENT:									
Accounting Period	2021/2									
B	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 corporate title of the subsidiary, not that of the parent corporation.  List any other name or names under which the owner conducts the business of the cable system.  If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.  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 OWNER/MAILING ADDRESS OF CABLE SYSTEM									
	RCN TELECOM SERVICES OF ILLINOIS INC									
				06063020212						
				060630 2021/2						
	650 COLLEGE RD E STE 3100 PRINCETON NJ 08540-6629									
С	INSTRUCTIONS: In line 1, give any business or trade names used to idnames already appear in space B. In line 2, give the mailing address of									
System	1 IDENTIFICATION OF CABLE SYSTEM:	ino system, ii dine	John Holli tile dadress giver	Till Space B.						
	MAILING ADDRESS OF CABLE SYSTEM:									
	2 (Number, street, rural route, apartment, or suite number)									
	(City, town, state, zip code)									
D Area	<b>Instructions:</b> For complete space D instructions, see page 1b. Identify with all communities.	only the frst comm	nunity served below and reli	st on page 1b						
Served	CITY OR TOWN	STATE								
First										
Community	Below is a sample for reporting communities if you report multiple cha	nnel line-ups in S	pace G.							
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#						
Sample	Alda Alliance	MD MD	A B	1 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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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.

LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
RCN TELECOM SERVICES OF ILLINOIS INC			060630						
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-com channel line-up designated by an alpha-letter(s) (based on your Space G reporting) at (based on your reporting from Part 9 of the DSE Schedule) in the appropriate column	ınd a subscriber grou								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#						
Chicago	IL			First					
Evanston	IL			Community					
Morton Grove	IL								
Skokie	IL								
Evansville	IN								
Lvansville	114								
				See instructions for					
				additional information on alphabetization.					
				on alphabetization.					
				Add rows as necessary.					
			•••••						

1			1

Name LEG

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 060630

# Ε

### Secondary Transmission Service: Subscribers and Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

RCN TELECOM SERVICES OF ILLINOIS INC

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

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

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

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

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

BLC	OCK 1		BLOCK 2		
	NO. OF			NO. OF	
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	CATEGORY OF SERVICE SUBSCRIBERS RATE	
Residential:					
Service to first set	73,283	\$	6.39	See Next Tab	
<ul> <li>Service to additional set(s)</li> </ul>	355	\$	18.23		
• FM radio (if separate rate)					
Motel, hotel	1,510	\$	11.27		
Commercial	4,884	\$	15.95		
Converter					
Residential					
Non-residential		[			

# F

### Services Other Than Secondary Transmissions: Rates

#### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

	BLOCK 2				
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable		Motel, hotel			
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial			
Fire protection		• Pay cable			
Burglar protection		Pay cable-add'l channel			
Installation: Residential		Fire protection		refer to next tab	
• First set		Burglar protection			
<ul> <li>Additional set(s)</li> </ul>	\$ 35.00				
• FM radio (if separate rate)		Reconnect			••••••
Converter		Disconnect			
		Outlet relocation	\$ 35.00		
		<ul> <li>Move to new address</li> </ul>			•••••

## RCN Telecom Services of Illinois Page 2 - Section F- Block 2

### Additional Services Other Than Secondary Transmissions:Rate

Service	Туре	Retail Rate		
Aapka Colors	International Premium	\$	14.95	
ART-Arabic	International Premium	\$	12.95	
CCTV4	International Premium	\$	9.95	
CTI Zhong Tian	International Premium	\$	11.95	
CCTV4/CTI Zhong Tian	International Premium	\$	11.95	
The Filipino Channel (TFC)	International Premium	\$	11.95	
GMA Pinoy TV	International Premium	\$	12.95	
GMA Life TV	International Premium	\$	9.95	
GMA Pinoy/TFC	International Premium	\$	19.95	
GMA Life/GMA Pinoy/TFC	International Premium	\$	29.95	
GMA Pinoy/TFC/Filipino On Demand	International Premium	\$	29.95	
GMA Life/GMA Pinoy/TFC/Filipino On Demand	International Premium	\$	35.95	
TV-5 Monde	International Premium	\$	9.95	
Antenna Satellite	International Premium	\$	14.95	
Mega Cosmos	International Premium	\$	11.95	
Antenna Satellite/Mega Cosmos	International Premium	\$	25.95	
RAITALIA	International Premium	\$	9.95	
TV Japan	International Premium	\$	24.95	
MBC (Muhwa Broadcasting Corporation)	International Premium	\$	12.95	
TVK24	International Premium	\$	12.95	
TVK24/MBC	International Premium	\$	19.95	
MYX	International Premium	\$	4.95	
TVN24	International Premium	\$	9.95	
iTVN	International Premium	\$	14.95	
TVN24/iTVN	International Premium	\$	19.95	
RTPi	International Premium	\$	9.95	
TV Globo	International Premium	\$	19.99	
PFC	International Premium	\$	19.95	
TV Globo/PFC	International Premium	\$	29.95	
RTVI	International Premium	\$	9.95	
RTVI Plus	International Premium	\$	9.95	
RTVI/RTVI Plus	International Premium	\$	14.95	
Channel One Russia (C1R)	International Premium	\$	14.95	
Russian Television Network (RTN)	International Premium	\$	15.95	
NTV America	International Premium	\$	15.95	
C1R/RTN/NTV America/RTVI/RTVI Plus	International Premium	\$	28.95	
ITV Gold	International Premium	\$	9.95	
Star India Gold	International Premium	\$	9.95	
Star One (name change to LifeOK in 2012)	International Premium	\$	9.95	
Star India Plus	International Premium	\$	11.95	
TV Asia	International Premium	\$	14.95	
Zee TV	International Premium	\$	11.95	
ITV/TV Asia	International Premium	\$	17.95	
ITV/Zee TV/Aapka Colors	International Premium	\$	19.95	

Service	Туре	Retail Rate		
Star Gold/Life OK/Star Plus/Aapka Colors	International Premium	\$	21.95	
TV Asia/Zee TV	International Premium	\$	24.95	
Star Gold/Life OK/Star Plus/ITV	International Premium	\$	26.95	
Star Gold/Life OK/Star Plus/TV Asia	International Premium	\$	27.95	
Star Gold/Life OK/Star Plus/Zee TV/Aapla Colors	International Premium	\$	34.95	
Star Gold/Life OK/Star Plus/ITV/Tv Asia/Zee TV/Aapka Colors	International Premium	\$	39.95	
MiVision Lite	International Premium	\$	12.00	
MiVision Plus	International Premium	\$	22.95	
Premiere Sports	Premiere Packages	\$	6.99	
Premiere News & Information	Premiere Packages	\$	5.99	
Premiere Children & Family	Premiere Packages	\$	5.99	
Premiere Movies & Entertainment	Premiere Packages	\$	10.99	
Premiere Total (includes all 4)	Premiere Packages	\$	17.95	
НВО	Premium	\$	19.95	
Showtime/The Movie Channel (TMC)	Premium	\$	10.00	
Cinemax	Premium	\$	10.00	
Starz	Premium	\$	10.00	
Premium Movies (All Premium)	Premium	\$	24.95	
HD Tier	High Definition Package	\$	-	
HD Expanded Tier	High Definition Package	\$	8.99	
The Jewish Channel	Subscription VOD	\$	6.50	
Bollywood Hits On Demand	Subscription VOD	\$	9.95	
Filipino On Demand	Subscription VOD	\$	7.95	
here! On Demand	Subscription VOD	\$	8.95	
Anime Network On Demand	Subscription VOD	\$	6.99	
Too Much for TV On Demand	Subscription VOD	\$	17.99	
Disney Channel Video On Demand	Subscription VOD	\$	4.99	
Fox Soccer Plus	Sports Premium	\$	14.95	
MLB Extra Innings (Regular Season)	Sports Package	\$	164.99	
MLB Extra Innings (Half Season)	Sports Package	\$	119.99	
MLB Extra Innings (Pennant Race)	Sports Package	\$	37.49	
MLS Direct Kick (Full Season)	Sports Package	\$	89.00	
MLS Direct Kick (Half Season)	Sports Package	\$	59.00	
NFL Redzone (Full Season)	Sports Package	\$	54.95	
NHL Center Ice (Regular Season)	Sports Package	\$	139.56	
NBA League Pass (Early Bird Season)	Sports Package	\$	189.00	
NBA League Pass (Full Season)	Sports Package	\$	199.00	
NBA League Pass (Holiday Offer)	Sports Package	\$	169.00	
NBA League Pass (Half Season)	Sports Package	\$	99.00	
NBA League Pass (Race to Playoffs)	Sports Package	\$	49.00	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 060630 RCN TELECOM SERVICES OF ILLINOIS INC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a **Primary** substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located 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 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION 1. CALL SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) **WBBM** 2 Ν No Chicago, IL **WCHU** Ε No Chicago, IL 16 See instructions for WCIU 26 Ν No Chicago, IL additional information n alphabetization. **WCPX** 38 No Chicago, IL ı WFLD 32 No Chicago, IL ı **WGBO** 66 I No Joliet, IL WGN 9 ı No Chicago, IL **WJYS** 62 I Hammond, IN No WLS 7 Ν No Chicago, IL Chicago, IL **WMAQ** 5 Ν No **WMEU** 22 Chicago, IL I No **WPWR** 50 I No Gary, IN **WSNS** 44 Ī Chicago, IL No Ε WTTW 11 No Chicago, IL **WWME** 23 No Chicago, IL ı **WXFT** 60 I Aurora, IL No **WYCC** Ε Chicago, IL 20 No **WYIN** 4 Ε Gary, IN No

FORM SA3E. PAGE 3. SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 060630 RCN TELECOM SERVICES OF ILLINOIS INC PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) G carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a Primary substitute program basis, as explained in the next paragraph. Transmitters: Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program Television basis under specifc FCC rules, regulations, or authorizations: Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located 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 AB 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF 6. LOCATION OF STATION 1. CALL SIGN **CHANNEL** OF (Yes or No) **CARRIAGE** NUMBER **STATION** (If Distant) WEHT 11 Ν Chicago, IL **WEVV** Ν 10 Chicago, IL WFIE 112 Ν Chicago, IL WTVW 106 Ν Chicago, IL WNIN 2 Ν Chicago, IL WTSN 105 Ν Chicago, IL WYYW 107 N Chicago, IL

**ACCOUNTING PERIOD: 2021/2** 

LEGAL NAME OF OWNER OF CABLE SYSTEM:

RCN TELECOM SERVICES OF ILLINOIS INC

20212

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

LEGAL NAME OF OWN	NER OF CABLE SY	STEM:			SYSTEM ID#		
RCN TELECON	I SERVICES	OF ILLING	DIS INC		060630	Name	
PRIMARY TRANSMITTI	ERS: TELEVISIO	N					
carried by your cable	system during th	ne accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under	G	
•				•	nin network programs [sections nd (2) certain stations carried on a	Primary	
substitute program ba	. , . ,	,	-	(6)(2) and (1))], a	na (2) seriam statione samed on a	Transmitters:	
				carried by your ca	able system on a substitute program	Television	
<ul> <li>basis under specifc F(</li> <li>Do not list the station</li> </ul>				e Special Stateme	ent and Program Log)—if the		
station was carried	-		it iii space i (iii	e opecial otateme	and Program Log/—in the		
<ul> <li>List the station here,</li> </ul>	and also in spa nformation cond	ice I, if the sta			ute basis and also on some other f the general instructions located		
		sign. Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify		
			-	_	ion. For example, report multi-		
WETA-simulcast).	A-2". Simulcast	streams must	be reported in o	column 1 (list eacr	n stream separately; for example		
,	e channel numb	per the FCC h	as assigned to t	he television stati	on for broadcasting over-the-air in		
			annel 4 in Wash	ington, D.C. This	may be different from the channel		
on which your cable sy	•		ation is a netwo	rk station an inde	pendent station, or a noncommercial		
					ast), "I" (for independent), "I-M"		
For the meaning of the	ese terms, see p	page (v) of the	e general instruc	ctions located in th			
planation of local serv				,.	s". If not, enter "No". For an ex- paper SA3 form		
l'		• ,	•		tating the basis on which your		
•		-		-	ering "LAC" if your cable system		
carried the distant stat	•				apacity. payment because it is the subject		
					tem or an association representing		
			•	• .	y transmitter, enter the designa-		
` ' '			•	•	ner basis, enter "O." For a further d in the paper SA3 form.		
					to which the station is licensed by the		
FCC. For Mexican or 0	Canadian statio	ns, if any, give	e the name of th	e community with	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	AC			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION	, ,	(If Distant)			
	<del></del>						
	······································						
					<u> </u>		
					<u> </u>		
					ļ		

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#		
RCN TELECOM	SERVICES	OF ILLING	IS INC		060630	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 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							
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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		

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#		
RCN TELECON	SERVICES	OF ILLING	DIS INC		060630	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 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							
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	3	• •	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		

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
RCN TELECON	I SERVICES	OF ILLING	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s	system during th	ne accounting	period, except	(1) stations carried	and low power television stations) donly on a part-time basis under	G
•				•	nin network programs [sections nd (2) certain stations carried on a	Primary
substitute program bas		,	-	(0)(2) (1)(1)	(2) 55114111 514115115 5411152 511 4	Transmitters:
				carried by your ca	able 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	•		<b>4</b> i		ute hasia and also an asses ather	
	formation conc				ute basis and also on some other the general instructions located	
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WETA-simulcast).			·	`	on for broadcasting over-the-air in	
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on which your cable sy			ation is a netwo	rk station an inde	pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
For the meaning of the	ese terms, see p	page (v) of the	e general instruc	tions located in th		
planation of local servi				**	s". If not, enter "No". For an ex- paper SA3 form	
	· ·	0 ()	0		tating the basis on which your	
		-		•	ering "LAC" if your cable system	
carried the distant stat	•				payment because it is the subject	
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,			•	• .	y transmitter, enter the designa- ner basis, enter "O." For a further	
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					to which the station is licensed by the	
FCC. For Mexican or ( Note: If you are utilizing				•	which the station is identifed.	
Note: If you are utilizing		• •	EL LINE-UP		латы ше-ар.	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE (If Distant)		
	NOMBLIX	OTATION		(II Distant)		
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LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
RCN TELECOM	I SERVICES	OF ILLINO	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	system during the cons in effect or 6.61(e)(2) and (4 sis, as explaine	ne accounting 1 June 24, 198 1), or 76.63 (re d in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; and	and low power television stations) d only on a part-time basis under in network programs [sections and (2) certain stations carried on a	G  Primary  Transmitters:  Television
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Note: If you are utilizing				-	which the station is identifed. channel line-up.	
		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	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name a
RCN TELECOM	I SERVICES	OF ILLINO	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	ystem during the	ne accounting I June 24, 198	period, except ( 31, permitting the	(1) stations carried e carriage of certa	and low power television stations) I only on a part-time basis under in network programs [sections	G
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basis. For further in in the paper SA3 fo	formation conc rm.	erning substit	ute basis statior	ns, see page (v) of	the basis and also on some other the general instructions located	
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on which your cable sy Column 3: Indicate	stem carried the in each case v	e station. whether the sta	ation is a networ	rk station, an inde	pendent station, or a noncommercial st), "I" (for independent), "I-M"	
(for independent multid For the meaning of the	cast), "E" (for no	oncommercial page (v) of the	educational), or general instruc	r "E-M" (for nonco tions located in th	mmercial educational multicast).	
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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	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
RCN TELECON	SERVICES	OF ILLING	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or .61(e)(2) and (4 sis, as explaine	ne accounting 1 June 24, 198 1), or 76.63 (red 1 in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; ar	and low power television stations) I only on a part-time basis under in network programs [sections nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television
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Trock in you are annum	ga.u.p.o oa.	• •	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	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Nama	
RCN TELECON	I SERVICES	OF ILLINO	IS INC		060630	Name	
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati	ystem during the	ne accounting I June 24, 198	period, except ( 31, permitting th	(1) stations carried e carriage of certa	and low power television stations) d only on a part-time basis under iin network programs [sections	G	
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basis. For further in in the paper SA3 fo	formation conc rm.	erning substit	ute basis statior	ns, see page (v) of	ute basis and also on some other the general instructions located		
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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		

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
RCN TELECOM	SERVICES	OF ILLING	DIS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
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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	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
RCN TELECON	SERVICES	OF ILLING	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or .61(e)(2) and (4 sis, as explaine	ne accounting 1 June 24, 198 1), or 76.63 (red 1 in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; ar	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a	Primary Transmitters: Television
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 educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you ha cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	C rules, regular here in space only on a substand also in spatformation concern. In station's call associated with associated with associated with a channel number. For example stem carried the in each case wentering the least), "E" (for not see terms, see pation is outside the distant static ion on a part-tire ion of a distant entered into or a primary transistimulcasts, also a canadian statio canadian statio canadian statio	titions, or auth G—but do list itute basis. ce I, if the sta erning substit sign. Do not read a station accepte a station accepte a station. The station accepte a station are basis because the station are basis because a station are stationary and station are stationary accepted by the station. For the station are station. For the station are station and accepted by the station are station. For the station are stationary accepted by the station are stationary accepted by the station and the station are stationary accepted by the station acce	orizations:  it in space I (the tion was carried ute basis station eport origination cording to its ove be reported in c as assigned to t annel 4 in Wash ation is a networ etwork), "N-M" (f educational), or e general instruct ince area, (i.e. "d general instruct d, you must com accounting perior use of lack of a man that is not s ane 30, 2009, be sociation repres you carried the of the general in r U.S. stations, I e the name of th	e Special Statemer l both on a substitute, see page (v) of a program services er-the-air designaticolumn 1 (list each the television staticington, D.C. This result in the station, an independent of the station, and indicated in the inplete column 5, so and indicate by entertivated channel of the station of the station of the stations located in the station of the stations in the	ent and Program Log)—if the  ute basis and also on some other if the general instructions located  is such as HBO, ESPN, etc. Identify ion. For example, report multi- instream separately; for example  on for broadcasting over-the-air in imay be different from the channel  pendent station, or a noncommercial ist), "I" (for independent), "I-M" immercial educational multicast). ie paper SA3 form. is". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your reining "LAC" if your cable system impacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- iner 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.	Television
	3	• •	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	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SY	STEM ID#	
RCN TELECOM	SERVICES	OF ILLING	DIS INC			060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati	ystem during the	ne accounting n June 24, 198	period, except 81, permitting th	(1) stations carried e carriage of certa	and low power television stations I only on a part-time basis under in network programs [sections		G
substitute program bas	sis, as explaine	d in the next p	oaragraph.	. , , , , , , , , , , , , , , , , , , ,	nd (2) certain stations carried on able system on a substitute progr		Primary Transmitters: Television
basis under specifc FC  Do not list the station	CC rules, regula here in space	ntions, or auth G—but do list	orizations:		nt and Program Log)—if the		
basis. For further in in the paper SA3 fo	and also in spa formation conc rm.	ice I, if the sta erning substit	tute basis station	ns, see page (v) of	the basis and also on some other the general instructions located		
each multicast stream	associated with	n a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Ident ion. For example, report multi- ı stream separately; for example	ily	
WETA-simulcast).  Column 2: Give the	e channel numb	per the FCC h	as assigned to t	the television stati	on for broadcasting over-the-air i		
on which your cable sy	stem carried th	e station.		_	may be different from the channe pendent station, or a noncomme		
educational station, by	entering the le	tter "N" (for ne	etwork), "N-M" (f	for network multica	ist), "I" (for independent), "I-M"		
For the meaning of the	se terms, see p	page (v) of the	e general instruc	ctions located in th	mmercial educational multicast). e paper SA3 form. s". If not, enter "No". For an ex-		
planation of local servi	ce area, see pa	age (v) of the	general instructi	ions located in the			
cable system carried the carried the distant state		-		-	ering "LAC" if your cable system		
For the retransmiss	ion of a distant	multicast stre	eam that is not s	ubject to a royalty	payment because it is the subject		
				•	tem or an association representily transmitter, enter the designa-	ng	
tion "E" (exempt). For s	simulcasts, also	enter "E". If	you carried the	channel on any oth	ner basis, enter "O." For a further		
Column 6: Give the	location of ea	ch station. Fo	r U.S. stations,	list the community	d in the paper SA3 form. to which the station is licensed b	by the	
FCC. For Mexican or C Note: If you are utilizin				•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	AM			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE			
	NUMBER	STATION		(If Distant)			
		<u> </u>					
	<u> </u>	T					

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Nama		
RCN TELECOM	I SERVICES	OF ILLING	DIS INC		060630	Name		
PRIMARY TRANSMITTE	RS: TELEVISIO	N						
carried by your cable s	system during th	ne accounting	period, except (	(1) stations carried	and low power television stations) I only on a part-time basis under iin network programs [sections	G		
76.59(d)(2) and (4), 76 substitute program bas	5.61(e)(2) and (4 sis, as explaine	4), or 76.63 (red d in the next p	eferring to 76.61 paragraph.	(e)(2) and (4))]; ar	nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: Television		
	here in space	G—but do list		e Special Stateme	ent 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	e channel numb	er the FCC h	as assigned to t	he television station	on for broadcasting over-the-air in may be different from the channel			
on which your cable sy Column 3: Indicate	stem carried the in each case v	e station. whether the st	ation is a netwo	rk station, an inde	pendent station, or a noncommercial			
(for independent multion For the meaning of the Column 4: If the st	cast), "E" (for no ese terms, see p ation is outside	oncommercial page (v) of the the local serv	educational), or e general instruc rice area, (i.e. "d	r "E-M" (for nonco ctions located in th listant"), enter "Ye	s". If not, enter "No". For an ex-			
-	ave entered "Ye	es" in column	4, you must con	nplete column 5, s	paper SA3 form. tating the basis on which your ering "LAC" if your cable system			
	ion of a distant	multicast stre	eam that is not s	ubject to a royalty	apacity. payment because it is the subject tem or an association representing			
the cable system and a tion "E" (exempt). For	a primary transi simulcasts, also	mitter or an as o enter "E". If y	ssociation repres	senting the primary	y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form.			
Column 6: Give the FCC. For Mexican or 0	e location of ea Canadian statio	ch station. Fo	r U.S. stations, I e the name of th	ist the community e community with	to which the station is licensed by the which the station is identifed.			
Note: If you are utilizing	g multiple char	• •	•		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			
	NOMBER	OTATION		(ii Diotaint)				

FURM SAJE. PAGE 3.				OVOTEM ID#	I
RCN TELECOM SERVICE		DIS INC		SYSTEM ID# 060630	Name
PRIMARY TRANSMITTERS: TELEV	ISION				
In General: In space G, identify e carried by your cable system durit FCC rules and regulations in effer 76.59(d)(2) and (4), 76.61(e)(2) a substitute program basis, as explushabitute Basis Stations: Who basis under specific FCC rules, reight of the station here in spatation was carried only on a set in the station here, and also in basis. For further information of in the paper SA3 form.  Column 1: List each station's each multicast stream as "WETA-2". Simulation were simulated to column 2: Give the channel in Column 2: Give the channel in the carried on the system of	very television strag the accounting of the accounting of the property of the accounting of the strag of the accounting of the strag of the accounting of th	period, except 81, permitting the referring to 76.61 paragraph. distant stations rorizations: tit in space I (the ation was carried tute basis station report origination coording to its own the reported in one	(1) stations carried e carriage of certa (e)(2) and (4))]; and carried by your case. Special Statement I both on a substitute, see page (v) of a program services er-the-air designate column 1 (list each the television stations).	ain network programs [sections and (2) certain stations carried on a substitute program able system on a substitute program and Program Log)—if the suite basis and also on some other af the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multinatream separately; for example on for broadcasting over-the-air in	G Primary Transmitters: Television
on which your cable system carrie Column 3: Indicate in each ca educational station, by entering th (for independent multicast), "E" (fi For the meaning of these terms, s Column 4: If the station is out- planation of local service area, se Column 5: If you have entered cable system carried the distant s carried the distant station on a pa For the retransmission of a dis of a written agreement entered in the cable system and a primary tr tion "E" (exempt). For simulcasts, explanation of these three catego	ad the station. se whether the state letter "N" (for nor noncommercial tee page (v) of the side the local sense page (v) of the state multicast stant multicast state on or before Juansmitter or an also enter "E". If ries, see page (v) f each station, giv	tation is a netwo etwork), "N-M" (f I educational), o e general instruct vice area, (i.e. "c general instruct 4, you must con accounting pericause of lack of a eam that is not s ine 30, 2009, be ssociation represent it or U.S. stations, i e the name of the	rk station, an inde for network multicar "E-M" (for noncostions located in the listant"), enter "Ye ons located in the nplete column 5, sod. Indicate by entoctivated channel of ubject to a royalty tween a cable systemating the primar channel on any other tructions located ist the community with	mmercial educational multicast).  the paper SA3 form.  s". If not, enter "No". For an expaper SA3 form.  tating the basis on which your ering "LAC" if your cable system capacity.  payment because it is the subject tem or an association representing y transmitter, enter the designater 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.	
, , ,	• •	EL LINE-UP	•		1
1. CALL 2. B'CAST SIGN CHANN NUMBE	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Name a
RCN TELECOM	SERVICES	OF ILLINO	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	ystem during the	ne accounting I June 24, 198	period, except ( 31, permitting the	(1) stations carried e carriage of certa	and low power television stations) I only on a part-time basis under in network programs [sections	G
substitute program bas	sis, as explaine	d in the next p	oaragraph.		nd (2) certain stations carried on a	Primary Transmitters: Television
<ul><li>basis under specifc FC</li><li>Do not list the station station was carried</li></ul>	here in space	G—but do list		e Special Stateme	nt and Program Log)—if the	
basis. For further in in the paper SA3 fo	formation conc rm.	erning substit	ute basis statior	ns, see page (v) of	ute basis and also on some other the general instructions located	
each multicast stream cast stream as "WETA	associated with	n a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi- stream separately; for example	
			•		on for broadcasting over-the-air in may be different from the channel	
educational station, by	in each case ventering the le	whether the state tter "N" (for ne	etwork), "N-M" (f	or network multica	pendent station, or a noncommercial st), "I" (for independent), "I-M"	
For the meaning of the Column 4: If the sta	se terms, see pation is outside	page (v) of the the local serv	e general instruc ice area, (i.e. "d	tions located in th istant"), enter "Ye	s". If not, enter "No". For an ex-	
cable system carried th	ave entered "Ye ne distant statio	es" in column on during the a	4, you must com accounting perio	nplete column 5, s ed. Indicate by ente	tating the basis on which your ering "LAC" if your cable system	
	ion of a distant	multicast stre	am that is not s	ubject to a royalty	apacity. payment because it is the subject tem or an association representing	
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also ree categories, e location of ea	enter "E". If y see page (v) ch station. Fo	ou carried the countries of the general in r U.S. stations, I	channel on any oth nstructions located ist the community	y transmitter, enter the designa- ner 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.	
Note: If you are utilizin				•		
	T	CHANN	EL LINE-UP	AP		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LECAL NAME OF OWN	IED OF CARLE CV	OTEM.			SYSTEM ID#	
RCN TELECON			IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or 6.61(e)(2) and (4.61) as explaine	ne accounting n June 24, 198 4), or 76.63 (ro d in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; ar	and low power television stations) I only on a part-time basis under in network programs [sections and (2) certain stations carried on a able system on a substitute program	<b>G</b> Primary  Transmitters:  Television
<ul><li>basis under specifc FC</li><li>Do not list the station station was carried</li></ul>	here in space	G—but do list		e Special Stateme	ent and Program Log)—if the	
List the station here, basis. For further in in the paper SA3 fo	and also in spa formation conc rm.	ice I, if the sta erning substit	ute basis statior	ns, see page (v) of	ute basis and also on some other the general instructions located such as HBO, ESPN, etc. Identify	
each multicast stream	associated with	n a station acc	cording to its over	er-the-air designat	ion. For example, report multi- stream separately; for example	
			-		on for broadcasting over-the-air in	
on which your cable sy	stem carried th	e station.			may be different from the channel pendent station, or a noncommercial	
(for independent multion For the meaning of the Column 4: If the star planation of local servi	cast), "E" (for no ese terms, see p ation is outside ce area, see pa	oncommercial page (v) of the the local serv age (v) of the	educational), or e general instruc rice area, (i.e. "d general instructi	r "E-M" (for noncor tions located in th istant"), enter "Yes ons located in the	s <sup>"</sup> . If not, enter "No". For an ex- paper SA3 form.	
cable system carried the carried the distant state.  For the retransmiss	ne distant statio ion on a part-tir ion of a distant	on during the a ne basis beca multicast stre	accounting perions nuse of lack of a eam that is not s	d. Indicate by entectivated channel cubicated channel cubicated to a royalty	tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject tem or an association representing	
tion "E" (exempt). For sexplanation of these the Column 6: Give the	simulcasts, also ree categories e location of ea	enter "E". If y see page (v) ch station. Fo	you carried the coording of the general in r U.S. stations, I	channel on any oth nstructions located ist the community	y transmitter, enter the designa- ner 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.	
Note: If you are utilizing				•		
	ı	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	

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name a
RCN TELECON	I SERVICES	OF ILLINO	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	system during the	ne accounting I June 24, 198	period, except ( 31, permitting th	(1) stations carried e carriage of certa	and low power television stations) I only on a part-time basis under in network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine Stations: With r	d in the next pespect to any	paragraph. distant stations		nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: 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.						
basis. For further in in the paper SA3 fo	formation conc rm.	erning substit	ute basis statior	ns, see page (v) of	te basis and also on some other the general instructions located	
each multicast stream cast stream as "WETA	associated with	n a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi- stream separately; for example	
			•		on for broadcasting over-the-air in may be different from the channel	
on which your cable sy Column 3: Indicate	stem carried the in each case v	e station. whether the sta	ation is a netwo	rk station, an inde	pendent station, or a noncommercial	
(for independent multid For the meaning of the <b>Column 4:</b> If the sta	cast), "E" (for no ese terms, see p ation is outside	oncommercial page (v) of the the local serv	educational), or e general instructice area, (i.e. "d	r "E-M" (for nonco tions located in th istant"), enter "Yes	s". If not, enter "No". For an ex-	
-	ave entered "Ye	es" in column	4, you must com	nplete column 5, s	tating the basis on which your	
carried the distant stat For the retransmiss	ion on a part-tir ion of a distant	ne basis beca multicast stre	use of lack of a	ctivated channel c ubject to a royalty	payment because it is the subject	
the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the	a primary transi simulcasts, also iree categories, e location of ea	mitter or an as enter "E". If y see page (v) ch station. Fo	sociation repres you carried the coording of the general in r U.S. stations, I	senting the primary channel on any oth nstructions located ist the community	tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the	
Note: If you are utilizing				•	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AR		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

LEGAL NAME OF OWNER OF CABLE	SYSTEM:		SYSTEM ID#	
RCN TELECOM SERVICE	S OF ILLINOIS INC		060630	Name
PRIMARY TRANSMITTERS: TELEVI	SION			
In General: In space G, identify ev carried by your cable system durin FCC rules and regulations in effec 76.59(d)(2) and (4), 76.61(e)(2) an substitute program basis, as expla Substitute Basis Stations: Wi	g the accounting period, e on June 24, 1981, permit d (4), or 76.63 (referring to ned in the next paragraph	ept (1) stations carried only g the carriage of certain n 5.61(e)(2) and (4))]; and (2	ly on a part-time basis under etwork programs [sections	G Primary Transmitters: Television
basis under specifc FCC rules, reg Do not list the station here in spa station was carried only on a su List the station here, and also in a basis. For further information co in the paper SA3 form.  Column 1: List each station's ceach multicast stream associated cast stream as "WETA-2". Simulcat WETA-simulcast).  Column 2: Give the channel nuits community of license. For examon which your cable system carried Column 3: Indicate in each case educational station, by entering the (for independent multicast), "E" (fo For the meaning of these terms, see Column 4: If the station is outs planation of local service area, see Column 5: If you have entered cable system carried the distant station on a par For the retransmission of a dist of a written agreement entered into the cable system and a primary tration "E" (exempt). For simulcasts, a explanation of these three categor	ulations, or authorizations ce G—but do list it in space bestitute basis.  space I, if the station was oncerning substitute basis all sign. Do not report originate it is streams must be report or the station according to st streams must be report or the station according to st streams must be report or the station.  WRC is Channel 4 in the station is a seletter "N" (for network), "I report of the station.  When the station is a seletter "N" (for network), "I report of the general de the local service area, apage (v) of the general in "Yes" in column 4, you must of the station during the accounting the accounting the accounting the accounting the accounting the accounting the station during the accounting the station during the accounting the station of the general that it is on or before June 30, 20 insmitter or an association also enter "E". If you carried es, see page (v) of the general that it is on or before June 30, 20 insmitter or an association also enter "E". If you carried es, see page (v) of the general that it is on or the station. For U.S. stations, if any, give the name	(the Special Statement a ried both on a substitute to titions, see page (v) of the tition program services sure over-the-air designation. in column 1 (list each street to the television station for ashington, D.C. This may twork station, an independ 1" (for network multicast), ), or "E-M" (for noncomment tructions located in the page of the column 5, stating and the column 5, stating of activated channel capator subject to a royalty pay between a cable system presenting the primary transport of the community to work the community to work the community with which th	and Program Log)—if the basis and also on some other general instructions located  ch as HBO, ESPN, etc. Identify For example, report multi- eam separately; for example  or broadcasting over-the-air in be different from the channel  dent station, or a noncommercial "I" (for independent), "I-M" ercial educational multicast). aper SA3 form. If not, enter "No". For an ex- per SA3 form.  og "LAC" if your cable system icity.  ment because it is the subject or an association representing ansmitter, enter the designa- pasis, enter "O." For a further the paper SA3 form. which the station is licensed by the ch the station is identifed.	I elevision
Note. If you are utilizing multiple of			iner inte-up.	
1. CALL 2. B'CAST SIGN CHANNI NUMBE	`	7? 5. BASIS OF 6. I	LOCATION OF STATION	

LEGAL NAME OF OWNER OF CABLE	SYSTEM:		SYSTEM ID#	
RCN TELECOM SERVIC	ES OF ILLINOIS INC		060630	Name
PRIMARY TRANSMITTERS: TELEVI	SION			
carried by your cable system durin FCC rules and regulations in effec 76.59(d)(2) and (4), 76.61(e)(2) ar substitute program basis, as expla	g the accounting period, except t on June 24, 1981, permitting d (4), or 76.63 (referring to 76. ined in the next paragraph.	of (1) stations carried the carriage of certa 61(e)(2) and (4))]; a	•	Primary Transmitters: Television
basis under specifc FCC rules, reg Do not list the station here in spastation was carried only on a su List the station here, and also in basis. For further information continuous in the paper SA3 form.  Column 1: List each station's ceach multicast stream associated cast stream as "WETA-2". Simulcated well-as a stream as "WETA-2". Simulcated cast sufficiency of license. For examon which your cable system carried the distant, set (for independent multicast), "E" (for the meaning of these terms, set Column 4: If the station is outs planation of local service area, see Column 5: If you have entered cable system carried the distant station on a parafor the retransmission of a dist of a written agreement entered into the cable system and a primary tration "E" (exempt). For simulcasts, explanation of these three categories and a primary tration "E" (exempt). For simulcasts, explanation of these three categories and a primary tration "E" (exempt). For simulcasts, explanation of these three categories and a primary tration "E" (exempt). For simulcasts, explanation of these three categories and a primary tration "E" (exempt). For simulcasts, explanation of these three categories and a primary tration "E" (exempt).	gulations, or authorizations: tice G—but do list it in space I (abstitute basis.) space I, if the station was carriponcerning substitute basis station carring substitute basis station according to its cast streams must be reported in amber the FCC has assigned to the ple, WRC is Channel 4 in Ward the station. See whether the station is a network eletter "N" (for network), "N-M" or noncommercial educational), see page (v) of the general instrue "Yes" in column 4, you must cation during the accounting pert-time basis because of lack of ant multicast stream that is not con or before June 30, 2009, be ansmitter or an association repealso enter "E". If you carried the less, see page (v) of the general each station. For U.S. stations ations, if any, give the name of	the Special Statement on a substitution, see page (v) or con program services over-the-air designation column 1 (list each of the television station shington, D.C. This work station, an inde (for network multicator "E-M" (for noncoluctions located in the "distant"), enter "Yestions located in the complete column 5, so indicate by enter a cable systement of a subject to a royalty between a cable systement on any other instructions located in the primare channel on any other instructions located, list the community with	ent and Program Log)—if the  ute basis and also on some other if the general instructions located  is such as HBO, ESPN, etc. Identify ition. For example, report multi- in stream separately; for example  on for broadcasting over-the-air in imay be different from the channel  pendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). ite paper SA3 form. s". If not, enter "No". For an ex- inpaper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- ner 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.	Television
Trote. If you are unimaring manapie of	CHANNEL LINE-U	•	onamici inic up.	•
1. CALL 2. B'CAST CHANN NUMBE	3. TYPE 4. DISTANT?  OF (Yes or No	5. BASIS OF	6. LOCATION OF STATION	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	
RCN TELECOM	SERVICES	OF ILLING	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas	ystem during the ons in effect or 6.61(e)(2) and (4 sis, as explaine	ne accounting n June 24, 198 4), or 76.63 (re d in the next p	period, except ( 31, permitting the eferring to 76.61 paragraph.	(1) stations carried e carriage of certa (e)(2) and (4))]; ar	and low power television stations) d only on a part-time basis under in network programs [sections nd (2) certain stations carried on a	Primary Transmitters: Television
basis under specifc FC  Do not list the station station was carried  List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the	CC rules, regular here in space only on a substand also in spatformation concern. In station's call associated with a case of the case of	ations, or auth G—but do list itute basis. Ince I, if the state rining substitute basis. Ince I, if the state rining substitute basis between the FCC has, WRC is Challe station. In whether the state of the local server age (v) of the station of the local server in column the basis became basis between the basis between the basis between the local server in the local server in column the basis between the basis between the basis between the local server in the local server in column the basis between the basis between the basis between the local server in the l	orizations:  it in space I (the tion was carried ute basis station eport origination cording to its ove be reported in c as assigned to t annel 4 in Wash ation is a networ etwork), "N-M" (f educational), or e general instruct ince area, (i.e. "d general instruct d, you must com accounting perior use of lack of a man that is not s ane 30, 2009, be sociation repres you carried the of the general in r U.S. stations, I e the name of th	e Special Statemer l both on a substitute, see page (v) of a program services er-the-air designaticolumn 1 (list each the television staticington, D.C. This result in the station, an independent of the station, and indicated in the inplete column 5, so and indicate by entertivated channel of the station of the station of the stations located in the station of the stations in the	ent and Program Log)—if the  ute basis and also on some other if the general instructions located  is such as HBO, ESPN, etc. Identify ion. For example, report multi- instream separately; for example  on for broadcasting over-the-air in imay be different from the channel  pendent station, or a noncommercial ist), "I" (for independent), "I-M" immercial educational multicast). ie paper SA3 form. is". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your reining "LAC" if your cable system impacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- iner 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.	Television
Trock in you are annum	ga.a.p.o oa.	• •	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	

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			SYSTEM ID#	Nama
RCN TELECOM	I SERVICES	OF ILLINO	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	ystem during the	ne accounting n June 24, 198	period, except ( 31, permitting th	(1) stations carried e carriage of certa	and low power television stations) d only on a part-time basis under iin network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine stations: With r	d in the next prespect to any	paragraph. distant stations		nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: 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.						
basis. For further in in the paper SA3 fo	formation conc rm.	erning substit	ute basis statior	ns, see page (v) of	ute basis and also on some other the general instructions located	
each multicast stream cast stream as "WETA	associated with	n a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi- a stream separately; for example	
			•		on for broadcasting over-the-air in may be different from the channel	
	in each case v	vhether the sta			pendent station, or a noncommercial ast), "I" (for independent), "I-M"	
(for independent multid For the meaning of the	cast), "E" (for no	oncommercial page (v) of the	educational), o general instruc	r "E-M" (for nonco ctions located in th	mmercial educational multicast).	
1	ave entered "Ye	es" in column	4, you must com	nplete column 5, s	paper SA3 form. tating the basis on which your ering "LAC" if your cable system	
carried the distant stat For the retransmiss	ion on a part-tir ion of a distant	ne basis beca multicast stre	use of lack of a eam that is not s	ctivated channel c ubject to a royalty	- · · · · · · · · · · · · · · · · · · ·	
the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the	a primary transi simulcasts, also iree categories, e location of ea	mitter or an as o enter "E". If y , see page (v) ch station. Fo	ssociation repres you carried the o of the general in r U.S. stations, I	senting the primary channel on any oth nstructions located ist the community	y transmitter, enter the designa- ner 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.	
Note: If you are utilizing		nnel line-ups,	use a separate s	space G for each o		
	1	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	

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name a
RCN TELECON	I SERVICES	OF ILLINO	IS INC		060630	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulati	system during the	ne accounting I June 24, 198	period, except ( 31, permitting th	(1) stations carried e carriage of certa	and low power television stations) I only on a part-time basis under in network programs [sections	G
substitute program bas Substitute Basis S	sis, as explaine Stations: With r	d in the next pespect to any	paragraph. distant stations		nd (2) certain stations carried on a able system on a substitute program	Primary Transmitters: 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.						
basis. For further in in the paper SA3 fo	formation conc rm.	erning substit	ute basis statior	ns, see page (v) of	te basis and also on some other the general instructions located	
each multicast stream cast stream as "WETA	associated with	n a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify ion. For example, report multi- stream separately; for example	
			•		on for broadcasting over-the-air in may be different from the channel	
on which your cable sy <b>Column 3:</b> Indicate	stem carried the in each case v	e station. whether the sta	ation is a netwo	rk station, an inde	pendent station, or a noncommercial sty, "I" (for independent), "I-M"	
(for independent multid For the meaning of the	cast), "E" (for no	oncommercial page (v) of the	educational), or general instruc	r "E-M" (for nonco tions located in th	mmercial educational multicast).	
1	ave entered "Ye	es" in column	4, you must com	nplete column 5, s	paper SA3 form. tating the basis on which your ering "LAC" if your cable system	
carried the distant stat For the retransmiss	ion on a part-tir ion of a distant	ne basis beca multicast stre	use of lack of a	ctivated channel c ubject to a royalty		
the cable system and a tion "E" (exempt). For s explanation of these th <b>Column 6:</b> Give the	a primary transi simulcasts, also iree categories, e location of ea	mitter or an as enter "E". If y see page (v) ch station. Fo	sociation repres you carried the coording of the general in r U.S. stations, I	senting the primary channel on any oth nstructions located ist the community	y transmitter, enter the designa- ner 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.	
Note: If you are utilizin				•		
	T	CHANN	EL LINE-UP	AW		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 060630 RCN TELECOM SERVICES OF ILLINOIS INC PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION

							7 LINIOD: 2021/2
RCN TELECOM SERVI			;		S	060630	Name
SUBSTITUTE CARRIAGE	E: SPECIA	AL STATEMEN	NT AND PROGRAM LOG	ì			
In General: In space I, ident substitute basis during the acexplanation of the programm	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authorizations.	For a further	Substitute
1. SPECIAL STATEMENT	CONCER	NING SUBST	TITUTE CARRIAGE				Carriage:
During the accounting per broadcast by a distant stat		ır cable system	carry, on a substitute bas	s, any nonne	etwork television program		Special Statement and Program Log
Note: If your answer is "No", leave the rest of this page blank. If your answer is "Yes," you must complete the program							
log in block 2.  2. LOG OF SUBSTITUTE	PROGRA	MS					
In General: List each subst				wherever po	ssible, if their meaning is	;	
clear. If you need more spa			al pages. ision program (substitute p	rogram) that	during the accounting		
period, was broadcast by a						tion	
under certain FCC rules, re							
SA3 form for futher informatitles, for example, "I Love L				"basketball"	. List specific program		
Column 2: If the program	n was broad	dcast live, ente	r "Yes." Otherwise enter "N				
			asting the substitute progra ne community to which the		ancod by the ECC or in		
the case of Mexican or Car							
		when your sys	tem carried the substitute p	orogram. Use	e numerals, with the mon	th	
first. Example: for May 7 giv		substitute pro	gram was carried by your o	cable system	List the times accurated	V	
to the nearest five minutes.						,	
stated as "6:00–6:30 p.m."	or "D" if the	listed program	was substituted for progra	mming that	our avatam waa raquira	4	
to delete under FCC rules a						u	
gram was substituted for pr	ogramming						
effect on October 19, 1976.							
	UDOTITUT				EN SUBSTITUTE	7. REASON	
	2. LIVE?	TE PROGRAM  3. STATION'S	l 	5. MONTH	AIAGE OCCURRED  6. TIMES	FOR DELETION	
TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO	DELETION	
					_		
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ACCOUNTING PERIOD: 2021/2 FORM SA3E. PAGE 6.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF ILLINOIS INC										
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."										
			DATE	ES AND HOURS	OF F	PART-TIME CAR	RIAGE				
	CALL SIGN	WHEN	N CARRIAGE OCC			CALL SIGN	WHEN	I CARRIAGE OCC			
		DATE	FROM	TO			DATE	FROM	TO		
				-							
				-				_			
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	AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name					
RC	N TELECOM SERVICES OF ILLINOIS INC	060630						
Inst all a (as	OSS RECEIPTS cructions: The figure you give in this space determines the form you fle and the amount you mounts (gross receipts) paid to your cable system by subscribers for the system's secondidentified in space E) during the accounting period. For a further explanation of how to come (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	ary transmission service	<b>K</b> Gross Receipts					
IMP	ORTANT: You must complete a statement in space P concerning gross receipts.	(Amount of gross receipts)						
<ul> <li>COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:</li> <li>Complete block 1, showing your minimum fee.</li> <li>Complete block 2, showing whether your system carried any distant television stations.</li> <li>If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.</li> <li>If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.</li> </ul>								
	art 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be en k 3 below.	ntered on line 1 of						
	art $6$ of the DSE schedule was completed, the amount from line $7$ of block $C$ should be enterlow.	ered on line 2 in block						
	art 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	be entered on line						
Block 1	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more ar least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period.	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	\$ 10,391,229.20						
	Enter the result here. This is your minimum fee.	\$ 110,562.68						
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the inf space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column 4 "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period?  — Yes—Complete the DSE schedule.  — X No—Leave block 3 below blank and cor  Line 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or	4, you must check 2 mplete line 1, block 4.						
Block 3	4, or part 9, block A of the DSE schedule. If none, enter zero  Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE	<u> </u>						
	schedule. If none, enter zero							
	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	\$ 110,562.68	Cable systems					
	Line 2. <b>SYNDICATED EXCLUSIVITY SURCHARGE:</b> Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter	0.00	submitting additional					
	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	\$ 111,287.68	form for submitting the					
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (See general instructions located in the paper SA3 form for more information.)	e page (i) of the	additional fees.					

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#								
- Italiio	RCN TELECOM SERVICES OF ILLINOIS INC	060630								
<b>M</b> Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.									
	Enter the total number of channels on which the cable     system carried television broadcast stations									
	Enter the total number of activated channels     on which the cable system carried television broadcast stations     and nonbroadcast services	4								
N Individual to	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual we can contact about this statement of account.)									
Be Contacted for Further Information	Name Bernadette Kokolus Telephone (732) 443-7090									
	Address 650 College Road East, Suite 3100 (Number, street, rural route, apartment, or suite number)									
	Princeton, NJ 08540 (City, town, state, zip)									
	Email bernadette.kokolus@astound.com Fax (optional)									
0	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)									
Certifcation	• I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)									
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or									
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or	ed								
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable so in line 1 of space B.	ystem								
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.  [18 U.S.C., Section 1001(1986)]									
	X /s/ Parisa Salehani									
	Enter an electronic signature on the line above using an "/s/" signature to certify this statement. (e.g., /s/ John Smith). Before entering the first forward slash of the /s/ signature, place your cursor in the box and presbutton, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility settings.	ss the "F2"								
	Typed or printed name: Parisa Salehani									
	Title: Senior Vice President - Controller  (Title of official position held in corporation or partnership)									
	Date: February 28, 2022									

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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLES			SYSTEM ID# 060630	Name
The Satellite Home Viewer A lowing sentence:  "In determining the to service of providing service."	TCONCERNING GROSS RECE act of 1988 amended Title 17, section 1 stal number of subscribers and the gross econdary transmissions of primary bross s collected from subscribers receiving s	111(d)(1)(A), of the Copyrig ss amounts paid to the cab adcast transmitters, the sy	le system for the basic stem shall not include sub-	Special Statement Concerning
For more information on whe paper SA3 form.	en to exclude these amounts, see the n	note on page (vii) of the ge	neral instructions in the	Gross Receipts Exclusion
During the accounting period made by satellite carriers to s	I did the cable system exclude any amo satellite dish owners?	ounts of gross receipts for	secondary transmissions	
X NO				
YES. Enter the total here	e and list the satellite carrier(s) below			
Name Mailing Address		Name Mailing Address		
INTEREST ASSESSME	NTS			
·	sheet for those royalty payments subm t assessment, see page (viii) of the ge	•		Q
Line 1 Enter the amount of	late payment or underpayment			Interest Assessment
Line 2 Multiply line 1 by the	interest rate* and enter the sum here .	······	x	
Line 3 Multiply line 2 by the	number of days late and enter the sun	n here	x days x 0.00274	
	0274** enter here and on line 3, block age 7)		\$ - (interest charge)	
	e chart click on <i>www.copyright.gov/lice</i> Division at (202) 707-8150 or licensing@			
** This is the decimal equ	uivalent of 1/365, which is the interest a	assessment for one day lat	e.	
,	orksheet covering a statement of acco address, first community served, accou	•	., .	
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 this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the 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: 2021/2

DSE SCHEDULE. PAGE 10.

## INSTRUCTIONS FOR DSE SCHEDULE WHAT IS A "DSE"

The term "distant signal equivalent" (DSE) generally refers to the numerical 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 account (page 3), a distant station is:

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

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space G of your Form SA3E, the station was carried part time because of lack of activated channel capacity, its basis of carriage value is determined by (1) calculating the number of hours the cable system carried the station during the accounting period, and (2) dividing that number by the total number of hours the station broadcast over the air during the accounting period. The basis of carriage value for all other stations listed in space G is 1.0.

**Step 3:** Multiply the result of step 1 by the result of step 2. This gives 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 particular 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 a 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, in 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 station 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 Syndicated 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 pursuant to former FCC rules in effect on June 24, 1981.
- Identify any station carried prior to June 25, 198I, on a substitute and/or
  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 in
  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.

### 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; (2) the total number of DSEs for that group's complement of stations; and (3) 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.

service areas (	or stations B, D, and E.	7
Santa Rosa	Stations A and C 35 mile zone	Λ
	Fairvale	F (
Rapid City	Bodega Bay	) E \$ E
<b>\</b> an	ns B, D, d E le zone	-

	Distant Stations Carried		Identification of	Identification of Subscriber Groups				
	STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS			
1	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)	<u>0.25</u>	Fairvale	Stations B, D, and E	120,000.00			
	TOTAL DSEs	2.472		TOTAL GROSS RECEIPTS	\$600,000.00			

Minimum Fee Total Gross Receipts	\$600,000.00
	x .01064
	\$6.384.00

		\$6,384.00				
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: 2021/2** 

DSE SCHEDULE. PAGE 11. (CONTINUED)

1	LEGAL NAME OF OWNER OF CABL				S	YSTEM ID#				
•	RCN TELECOM SERVICES OF ILLINOIS INC 0									
	SUM OF DSEs OF CATEGOR  • Add the DSEs of each station Enter the sum here and in line		0.00							
2 Computation of DSEs for	of space G (page 3).  In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or nor									
Category "O"	mercial educational station, giv	e the DSE as ".2	CATEGORY "O" STATION	IS: DSE						
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Add rows as										
necessary.										
Remember to copy al formula into new										
rows.										
TOWS.										

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Name		OWNER OF CABLE SYSTEM:  OM SERVICES OF IL	LINOIS INC				S	060630	
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	figure should correspond with the information given in space J. Calculate only one DSE for each station.  Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period.  Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station.  Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25."  Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper								
Capacity			CATEGORY	LAC STATIONS:	COMPUTATI	ON OF DSEs			
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEI	JRS ED BY M	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	SE VALUI	Ē	·Ε	
			÷		<u> </u>	<u>x</u>			
			÷		=	x x	=		
			÷		=	x	=		
			÷		=	x	=		
			÷		=	x	=		
			÷ ÷		=	x x			
Computation of DSEs for Substitute-Basis Stations	space I).  Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted								
		Sl	JBSTITUTE:	BASIS STATION	IS: COMPUTA	ATION OF DSEs			
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBE OF DAY IN YEAF	S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	
		-		=		-		=	
		-		=		÷		=	
		-		=				=	
		4	-	=		÷	-	=	
	Add the DSEs	GOF SUBSTITUTE-BASIS of each station. Im here and in line 3 of pa	S STATIONS:	edule,	▶	0.00	]	=	
5		ER OF DSEs: Give the ames applicable to your system		poxes in parts 2, 3, and	4 of this schedule	and add them to provide t	ne total		
Total Number	1. Number	of DSEs from part 2 ●				<b>&gt;</b>	0.00		
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>	0.00		
	3. Number	of DSEs from part 4 ●				<b></b>	0.00		
								<del></del>	
	TOTAL NUMBE	R OF DSEs						0.00	

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2021/2

	OWNER OF CABLE S		S INC				S	YSTEM ID# 060630	Name
In block A:	ck A must be comp		art 6 and part 7	of the DSF schedu	ıle blank and	complete part	8. (page 16) of the		6
schedule.		·	•	of the DOL scried	die blatik allu	complete part	o, (page 10) of the		
• If your answer If	"No," complete blo	CKS B and C I		TELEVISION MA	ARKETS				Computation of
effect on June 24,	m located wholly ou , 1981? nplete part 8 of the s plete blocks B and 0	schedule—D0	ajor and small	er markets as defin	ed under sect		C rules and regula	tions in	3.75 Fee
			CK B: CARF	RIAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	of distant sta gulations pric e DSE Schec	itions listed in porto June 25, 1	part 2, 3, and 4 of the 981. For further ex eletter M below ref	nis schedule tl planation of p	nat your syster ermitted statio	ns, see the	•	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommerica D Grandfathered instructions fo E Carried pursua *F A station prev	les and reguled pursuant to as defined al educational station (76.6 r DSE schedunt to individuriously carried HF station will	ations cited be the FCC markin 76.5(kk) (76 I station [76.59 5) (see paragrule). all waiver of FC don a part-timethin grade-B co	e or substitute basis ontour, [76.59(d)(5)	e in effect on 557, 76.59(b),  (1), 76.63(a) r  (a) referring t  stitution of gra  s prior to June	June 24, 1981. 76.61(b)(c), 76 referring to 76. to 76.61(d)] andfathered sta	.63(a) referring to 61(e)(1) tions in the		
Column 3:		stations ider	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	l 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	
								0.00	
		E	BLOCK C: CC	MPUTATION OF	3.75 FEE				
Line 1: Enter the	e total number of [	OSEs from p	art 5 of this s	chedule					
Line 2: Enter the	sum of permitted	d DSEs from	block B abo	/e				-	
	line 2 from line 1. leave lines 4–7 bl			•		ite.		0.00	
Line 4: Enter gro	oss receipts from	space K (pa	ge 7)				x 0.03	375	Do any of the DSEs represent partially
Line 5: Multiply I	ine 4 by 0.0375 a	nd enter sur	n here				x		partially permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	s from line 3	3					<u>-</u>	carriage? If yes, see part 9 instructions.
Line 7: Multiply I	ine 6 by line 5 and	d enter here	and on line 2	, block 3, space L	_ (page 7)			0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630							Name		
BLOCK A: TELEVISION MARKETS (CONTINUED)  1. CALL   2. PERMITTED   3. DSE   1. CALL   2. PERMITTED   3. DSE   3. DSE   4. CALL   4. PERMITTED   5. DSE   5. DSE   6. DSE   7. CALL   7. C								6	
SIGN	BASIS	0. BGE	SIGN	BASIS	U. DOL	SIGN	BASIS	0. DOL	
									Computation of 3.75 Fee
					<u></u>				
					l				
			···	+	<u> </u>	<u> </u>			

**ACCOUNTING PERIOD: 2021/2** 

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN TELECOM SERVICES OF ILLINOIS INC 060630 Instructions: You must complete this worksheet for those stations identified by the letter "F" in column 2 of block B, part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B-Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSF **PERIOD CARRIAGE** DSE DSE Instructions: Block A must be completed. 7 Computation If your answer is "Yes," complete blocks B and C, below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Was any station listed in block B of part 7 carried in any commu-Is any station listed in block B of part 6 the primary stream of a commercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer or in part, over the cable system? to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 TOTAL DSEs TOTAL DSEs

LEGAL NA	ME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF ILLINOIS INC	SYSTEM ID# 060630	Name
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	10,391,229.20	7
Section 2	A. Enter the total DSEs from block B of part 7	0.00	Computation of the
	B. Enter the total number of exempt DSEs from block C of part 7	0.00	Syndicated Exclusivity
	C. Subtract line B from line A and enter here. This is the total number of DSEs subject to the surcharge computation. If zero, proceed to part 8	0.00	Surcharge
• Is an	y portion of the cable system within a top 50 television market as defined by the FCC?  Yes—Complete section 3 below.	<i>i</i> .	
	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 DS	SE	
	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)		
	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 DS 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)	SE	
	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		
1			

Name		ME OF OWNER OF CABLE SYSTEM: RCN TELECOM SERVICES OF ILLINOIS INC	SYSTEM ID# 060630							
7 Computation of the Syndicated Exclusivity Surcharge	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.  A. Enter 0.00300 of gross receipts (the amount in section 1).  B. Enter 0.00189 of gross receipts (the amount in section 1).  C. Multiply line B by 3.000 and enter here.  D. Enter 0.00089 of gross receipts (the amount in section 1).  \$\begin{array}{c} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	060630							
		Enter here and on line 2, block 4, space L (page 7)  Syndicated Exclusivity Surcharge.	<u></u>							
8 Computation of Base Rate Fee	6 was a In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of p checked "Yes," use the total number of DSEs from part 5. lock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. Ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B bel	ow							
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS									
	• 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 following sections.									
	<u>L</u>	<u> </u>								
	Section 1	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE								
	Section	Enter the amount of gross receipts from space K (page 7)								
	2	(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 <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.  A. Enter 0.01064 of gross receipts  (the amount in section 1)								
		(the figure in section 2) and enter here								
		D. Multiply line B by line C and enter here								
		and in block 3, line 1, space L (page 7)	0.00							
		Base Rate Fee	V.UU							

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2021/2

DOL 001	Account	3 1 EIIIOD: 2021/2
	AME OF OWNER OF CABLE SYSTEM:  TELECOM SERVICES OF ILLINOIS INC  O60630	Name
Section	If the figure in section 2 is <b>more than 4.000</b> , compute your base rate fee here and leave section 3 blank.	
4	A. Enter 0.01064 of gross receipts  (the amount in section 1)  ▶\$	8
	B. Enter 0.00701 of gross receipts  (the amount in section 1)  * \$	Computation
		of Base Rate Fee
	C. Multiply line B by 3.000 and enter here	
	D. Enter 0.00330 of gross receipts	
	(the amount in section 1) ▶ \$	
	E. Subtract 4.000 from total DSEs	
	(the figure in section 2) and enter here▶	
	F. Multiply line D by line E and enter here <b>\$</b>	
	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	
	RTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall the reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in	9
l .	eral: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude	
receipt	s from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this	Computation of
exclusi	ion, you must:	Base Rate Fee
station DSEs	Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group.	and Syndicated Exclusivity Surcharge
also co	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 empute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, cable system is wholly located outside all major television markets, complete block A only.	for Partially Distant Stations, and
_	o Identify a Subscriber Group for Partially Distant Stations	for Partially
Step 1	: For each community served, determine the local service area of each wholly distant and each partially distant station you to that community.	Permitted Stations
outside	: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located at the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by me token, the station is distant to the subscriber.)	
subscr	: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each iber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable will have only one subscriber group when the distant stations it carried have local service areas that coincide.	
,	uting the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber	
	n section:	
• Identi	fy the communities/areas represented by each subscriber group.	
	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 ibers in the group.	
• If:		
4 of thi	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 s schedule; or,	
, .	portion of your system is located in a major or smaller televison market, give each station's DSE as you gave it in block B, i 6 of this schedule.	
• Add t	he DSEs for each station. This gives you the total DSEs for the particular subscriber group.	
	ulate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions appear SA3 form.	
page. DSEs	bute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your calculations on the form.	

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 060630 RCN TELECOM SERVICES OF ILLINOIS INC Guidance for Computing the Royalty Fee for Partially Permitted/Partially NonPermitted Signals Step 1: Use part 9, block A, of the DSE Schedule to establish subscriber groups to compute the base rate fee for wholly and partially permitted distant signals. Write "Permitted Signals" at the top of the page. Note: One or more permitted signals in these subscriber groups may be partially distant. Step 2: Use a separate part 9, block A, to compute the 3.75 percent fee for wholly nonpermitted and partially nonpermitted distant signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by .0375 and enter the grand total 3.75 percent fees on line 2, block 3, of space L. Important: The sum of the gross receipts reported for each part 9 used in steps 1 and 2 must equal the amount reported in space K. Step 3: Use part 9, block B, to compute a syndicated exclusivity surcharge for any wholly or partially permitted distant signals from step 1 that is subject to this surcharge. Guidance for Computing the Royalty Fee for Carriage of Distant and Partially Distant Multicast Streams Step 1: Use part 9, Block A, of the DSE Schedule to report each distant multicast stream of programming that is transmitted from a primary television broadcast signal. Only the base rate fee should be computed for each multicast stream. The 3.75 Percent Rate and Syndicated Exclusivity Surcharge are not applicable to the secondary transmission of a multicast stream. You must report but not assign a DSE value for the retransmission of a multicast stream that is the subject of a written agreement entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter.

LEGAL NAME OF OWNE RCN TELECOM SE							060630	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	FIRST	SUBSCRIBER GROU	IP		SECOND	SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA	Chicag	o IL		COMMUNITY/ AREA	9			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computati
CALL GIGIT	DOL	OALL GIGIN	DOL	OALL SIGIV	DOL	OALL SIGIV	DOL	Base Rate I
								and
								Syndicate
								Exclusivit
								Surcharg
								for
						+		Partially
			<u></u>					Distant Stations
	<del></del>		<del></del>					Stations
	···		<del></del>			+	•••••	
			<u> </u>					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	roup	s 10,391	1,229.20	Gross Receipts Second Group \$ 0.00				
	- Cap	<u> </u>			5.14 <b>5</b> .54p	<u>*</u>		
<b>ase Rate Fee</b> First Gr	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	THIRD	SUBSCRIBER GROU	IP		FOURTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u> </u>					
			<u> </u>					
			<del>.  </del>					
	<mark></mark>	H	<del></del>			+		
			<u></u>					
			<u> </u>			<u> </u>		
	<del></del>		-					
	<del> </del>		<del></del>					
	<u>-</u>		<del>-</del>			+		
otal DSEs			0.00	Total DSEs			0.00	
Yrana Bassinta Third C	roup	¢.	0.00	Cross Bossints Four	th Croup	•	0.00	
Gross Receipts Third G	noup	\$	0.00	Gross Receipts Four	ai Gioup	\$	0.00	
sase Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
			iber group a	II s shown in the boxes a	above.			
nter here and in block	3, line 1, s	pace L (page 7)				\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  SYSTEM ID# 060630								Name
		COMPUTATION O		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	4		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
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		OOMMUNUTY/ADE		SUBSCRIBER GROU	JP <b>0</b>	
COMMUNITY/ ARE			0	COMMUNITY/ ARE/				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  SYSTEM ID# 060630								Name
		COMPUTATION C		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	Α		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for
								Partially
								Distant Stations
Total DSEs		<u> </u>	0.00	Total DSEs		<del>                                      </del>	0.00	
Gross Receipts First	t 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	JP <b>0</b>	
OOMMONT 1774 C				COMMONT 17 7 A CE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP THIRTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA  0 COMMUNITY/ AREA  0 COMMUNITY/ AREA  0 CALL SIGN DSE	Name
THIRTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 COMMUNITY/ AREA	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CALL SIGN DSE CALL SIGN DSE  CALL SIGN	•
Total DSEs	9
Total DSEs	Computation of
Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA  O Gross Receipts Second Group \$ 0.00  SIXTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA  O	Base Rate F
Gross Receipts First Group \$ 0.00  Gross Receipts Second Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	and
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Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Surcharge
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	for
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Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Distant Stations
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	Stations
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
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Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee Second Group \$ 0.00 SIXTEENTH SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
FIFTEENTH SUBSCRIBER GROUP  SOMMUNITY/ AREA  O  COMMUNITY/ AREA	
FIFTEENTH SUBSCRIBER GROUP  SOMMUNITY/ AREA  O  COMMUNITY/ AREA	
FIFTEENTH SUBSCRIBER GROUP  SIXTEENTH SUBSCRIBER GROUP  COMMUNITY/ AREA	
OMMUNITY/ AREA 0 COMMUNITY/ AREA 0	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	
otal DSEs 0.00 Total DSEs 0.00	
iross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00	
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	

NOIS INC 060630 Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630							
FATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP	FEES FOR EACH SUBS(	BASE RA	COMPUTATION O	BLOCK A:	B			
BER GROUP EIGHTEENTH SUBSCRIBER GROUP			SUBSCRIBER GROU					
0 COMMUNITY/ AREA 0 Computation	OMMUNITY/ AREA	0			COMMUNITY/ AREA			
	CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN			
Base Rate Fo								
and								
Syndicated								
Exclusivity								
Surcharge								
for								
Partially								
Distant								
Stations								
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	tal DSEs	0.00			otal DSEs			
0.00 Gross Receipts Second Group \$ 0.00	oss Receipts Second Group	0.00	\$	oup	ross Receipts First Gr			
0.00 Base Rate Fee Second Group \$ 0.00	se Rate Fee Second Group	0.00	\$	oup	<b>ase Rate Fee</b> First Gro			
BER GROUP TWENTIETH SUBSCRIBER GROUP	TWENTIE	Р	SUBSCRIBER GROU	NTEENTH	NIN			
0 COMMUNITY/ AREA 0	OMMUNITY/ AREA				COMMUNITY/ AREA			
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	tal DSEs	0.00			otal DSEs			
0.00 Total DSEs 0.00	D		-					
		0.00	•	****	Proce Descripto TIVIC			
0.00         Total DSEs         0.00           0.00         Gross Receipts Fourth Group         \$         0.00	oss Receipis Fouriii Group	0.00	\$	roup	Gross Receipts Third Gr			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  SYSTEM ID# 060630								Name
TW		COMPUTATION C SUBSCRIBER GRO	UP	TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA	A		0	COMMUNITY/ AREA	0	<b>9</b> Computation		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
						<u> </u>		Exclusivity
						<u> </u>		Surcharge for
								Partially
						<u> </u>		Distant Stations
			····			<del>                                     </del>		Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	d Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<del> </del>		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$		

LEGAL NAME OF OW RCN TELECOM		E SYSTEM: OF ILLINOIS IN	С			\$	060630	Name
		COMPUTATION C		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	IP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
		SUBSCRIBER GRO		ii e		SUBSCRIBER GROU	JP <b>0</b>	
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
				Ш				
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

RCN TELECOM S			С			\$	060630	Name
	BLOCK A:	COMPUTATION (	OF BASE RA	ATE FEES FOR EAC	CH SUBSCRI	BER GROUP		
TWE		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computatio
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN DSE			
CALL CICIT	DOL	O/ LEE GIGIT	DOL	O/ LEE OF OTT	562	O/ LEE GIGIT	562	of Base Rate F
								and
								Syndicated
								Exclusivity
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								Distant Stations
			····					Stations
		<u> </u>	····			<del> </del>		
otal 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			0.00	Base Rate Fee Seco	ond Group	\$	0.00	
TH	IIRTY-FIRST	SUBSCRIBER GRO	DUP	THIF	RTY-SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		H				<del> </del>		
		<del> </del>	····			-		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				<u>  </u>				
			criber group a	as shown in the boxes	above.	¢		
inter here and in bloo	ск з, line 1, s	pace ∟ (page /)				\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								Name
TI		COMPUTATION C		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	Α		0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee and
								Syndicated
								Exclusivity Surcharge
								for
								Partially Distant
								Stations
Total DSEs		Ш	0.00	Total DSEs		Ц	0.00	
Gross Receipts First	t Group	<b>\$</b>	0.00	Gross Receipts Sec	ond Group	\$	0.00	
,	•	·				·		
Base Rate Fee First		\$	0.00	Base Rate Fee Sec		\$	0.00	
T COMMUNITY/ AREA		SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP <b>0</b>	
OOMMONT 17 7 (1CL)				COMMONT 17 74 CE				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thir	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Thir	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
	BLOCK A:	COMPUTATION	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	_
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٨		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O' LEE GIGIT	DOL	O' LE GIOIT	DOL	O/ LEE GIGIT	BOL	OF ILLE STORY	BOL	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
						-		
						<u> </u>		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
THII	RTY-NINTH	SUBSCRIBER GRO	DUP		FORTIETH	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>		
							·····	
			····				······	
		H	····			-		
						-		
otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third	Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	th Group	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630									
	BLOCK A:	COMPUTATION (	OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP			
		SUBSCRIBER GRO		TT		SUBSCRIBER GROU	JP	•	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation	
CALLE CICIT	562	OF ILL STOTA	DOL	O/ LEE GIGIT	562	GALLE GIGIT	562	Base Rate F	
								and	
								Syndicated	
								Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant Stations	
								Stations	
			····						
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
FOF	RTY-THIRD	SUBSCRIBER GRO	UP	FOF	RTY-FOURTH	SUBSCRIBER GROU	JP		
OMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		<u> </u>							
				-					
			····						
otal DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
							$\overline{}$		
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Race Pate Eco. Add 4	he hase ret	a face for each sub-	criber group	as shown in the bayes	ahove				
Enter here and in block			unuer group a	as shown in the boxes a	abuve.	\$			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
F		COMPUTATION C		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
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
								for Partially
								Distant
								Stations
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	: Group	<b>s</b>	0.00	Gross Receipts Sec	ond Group	\$	0.00	
	'				- '	· ·		
Base Rate Fee First	•	\$	0.00	Base Rate Fee Sec		\$	0.00	
FORT		SUBSCRIBER GRO	0 0	COMMUNITY/ AREA		SUBSCRIBER GROU	JP <b>0</b>	
	1	II	T					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
							·····	
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts Third	Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth Group \$ 0.00		0.00		
Base Rate Fee: Add Enter here and in blo			criber group a	II as shown in the boxes	above.	\$		

CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base  Sylvation  Superior of the control of the contro	LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
FORTY-NINTH SUBSCRIBER GROUP  COMMUNITY/ AREA  COMMUNITY/	BL(	CK A: COMPUTATION OF E	BASE RA	ATE FEES FOR EACH	I SUBSCRIE	BER GROUP			
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base  CALL SIGN DSE DSE CALL SIGN DSE CALL S							Р	•	
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE Base  CALL SIGN DSE	MMUNITY/ AREA		0	COMMUNITY/ AREA	COMMUNITY/ AREA 0			9	
Sylvania Syl	ALL SIGN	SE CALLSIGN	DSF	CALLSIGN	DSE	CALL SIGN	DSE	Computation of	
	ALL GIGIN	OALE SIGIN	DOL	OALE GIGIN	DOL	CALL SIGIN	DOL	Base Rate F	
Sustain the second Group \$ 0.00  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA								and	
FIFTY-FIRST SUBSCRIBER GROUP  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA								Syndicated	
FIFTY-FIRST SUBSCRIBER GROUP  Total DSEs  0.00  Gross Receipts First Group  \$ 0.00  Base Rate Fee First Group  \$ 0.00  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  0  COMMUNITY/ AREA  0								Exclusivity	
Total DSEs								Surcharge	
Total DSEs 0.00 Total DSEs 0.00 Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.00 Base Rate Fee First Group \$ 0.00 FIFTY-FIRST SUBSCRIBER GROUP FIFTY-SECOND SUBSCRIBER GROUP COMMUNITY/ AREA 0 COMMUNITY/ AREA 0								for	
Total DSEs								Partially	
Total DSEs  O.00 Gross Receipts First Group  Sase Rate Fee First Group  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O								Distant	
Gross Receipts First Group \$ 0.00  Gross Receipts Second Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0								Stations	
Gross Receipts First Group \$ 0.00  Gross Receipts Second Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0									
Gross Receipts First Group \$ 0.00  Gross Receipts Second Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA 0 COMMUNITY/ AREA 0									
Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA  O Gross Receipts Second Group \$ 0.00  Base Rate Fee Second Group \$ 0.00  FIFTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA  O							<u> </u>		
Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA  O Gross Receipts Second Group \$ 0.00  Base Rate Fee Second Group \$ 0.00  FIFTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA  O									
Gross Receipts First Group \$ 0.00  Base Rate Fee First Group \$ 0.00  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA  O Gross Receipts Second Group \$ 0.00  Base Rate Fee Second Group \$ 0.00  FIFTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA  O COMMUNITY/ AREA  O									
Base Rate Fee First Group \$ 0.00  FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  0  COMMUNITY/ AREA  0	al DSEs		0.00	Total DSEs			0.00		
FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O	oss Receipts First Grouր	<b>\$</b>	0.00	Gross Receipts Secon	nd Group	\$	0.00		
FIFTY-FIRST SUBSCRIBER GROUP  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O  COMMUNITY/ AREA  O									
COMMUNITY/ AREA 0 COMMUNITY/ AREA 0	se Rate Fee First Grouր	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
	FIFTY	FIRST SUBSCRIBER GROUP		FIFT	Y-SECOND	SUBSCRIBER GROUI	Р		
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE	MMUNITY/ AREA		0	COMMUNITY/ AREA	0				
	ALL SIGN	SE CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					<b>.</b>				
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					···				
Total DSEs 0.00 Total DSEs 0.00	al DSEs		0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.00			0.00	Gross Receipts Fourtl	n Group	\$	0.00		
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.00	se Rate Fee Third Grou	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00		

BLOCK A: COMPUTE FIFTY-THIRD SUBSCR COMMUNITY/ AREA  CALL SIGN DSE CALL S	0	FIF	TY-FOURTH	BER GROUP SUBSCRIBER GROU	JP <b>0</b>	9	
FIFTY-THIRD SUBSCR	IBER GROUP 0	COMMUNITY/ AREA	TY-FOURTH			9	
					0	9	
CALL SIGN DSE CALL S	SIGN DSE	CALL SIGN	DSE	COMMUNITY/ AREA 0			
			CALL SIGN DSE CALL SIGN DSE				
			332	0/122 0.0.1	332	of Base Rate F	
						and	
						Syndicated	
						Exclusivity	
						Surcharge	
						for	
						Partially	
						Distant Stations	
						Stations	
otal DSEs	0.00	Total DSEs			0.00		
Gross Receipts First Group \$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
ase Rate Fee First Group \$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
FIFTY-FIFTH SUBSCR	IBER GROUP		FIFTY-SIXTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA	0	COMMUNITY/ AREA			0		
CALL SIGN DSE CALLS	SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE		
				_			
			····		<u> </u>		
otal DSEs	0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00		Gross Receipts Four	th Group	\$	0.00		
					<del></del>		
Base Rate Fee Third Group	0.00	Base Rate Fee Four	th Group	\$	0.00		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIFTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  CALL SIGN  DSE  CALL SIGN  DSI  CALL SIGN  DSE  CALL SIGN  DSE  CALL SIGN  DSI  CALL SIGN  DSE  CALL SIGN  DSI  CALL SIGN  D	O Gomputation of Base Rate If and Syndicate Exclusivit Surcharge for Partially Distant Stations
FIFTY-SEVENTH SUBSCRIBER GROUP  COMMUNITY/ AREA  O  CALL SIGN  DSE  CALL SIGN	Computation  of Base Rate F and Syndicate Exclusivit Surcharg for Partially Distant
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CA	Computation  of Base Rate F and Syndicate Exclusivit Surcharg for Partially Distant
Total DSEs	Base Rate F and Syndicate Exclusivit Surcharg for Partially Distant
Total DSEs	Base Rate f and Syndicate Exclusivit Surcharg for Partially
	Syndicate Exclusivit Surcharg for Partially Distant
	Exclusivit Surcharg for Partially Distant
	Surcharg for Partially Distant
	for Partially Distant
	Partially Distant
	Distant
	Stations
	1
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$ 0.0	)
	<u>_</u>
	$\neg$
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$ 0.0	<u> </u>
FIFTY-NINTH SUBSCRIBER GROUP SIXTIETH SUBSCRIBER GROUP	
COMMUNITY/ AREA COMMUNITY/ AREA	0
CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI	<u> </u>
otal DSEs 0.00 Total DSEs 0.0	)
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.0	<u> </u>
	٦
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$ 0.0	<u> </u>

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
	BLOCK A:	COMPUTATION C	OF BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
SIX	(TY-FIRST	SUBSCRIBER GRO	UP	SIX	SIXTY-SECOND SUBSCRIBER GROUP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL CICIA	562	O, LEE GIGIT	BOL	O/ LEE O/O/4	502	OFFICE STORY	562	Base Rate F
			···					and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
	····				<b></b>			Stations
	···		···					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SIX	TY-THIRD	SUBSCRIBER GRO	UP	SIX	(TY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ 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	
Gross Receipts Third Group \$ 0.00			Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Gross Receipts Third G  Base Rate Fee Third G  Base Rate Fee: Add th Enter here and in block	Group se <b>base rat</b> e	\$ e fees for each subsc	0.00	Base Rate Fee Four	th Group			

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
E	LOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٩		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
07.22 0.0.1		07.22 0.0.1	202	07.22 5.6.1	332	07.122.01011	332	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
			····					Stations
		H	····			<del> </del>		
						-		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
•	·							
<b>sase Rate Fee</b> First Gr	oup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-S	SEVENTH	SUBSCRIBER GRO	UP	S	IXTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE/	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
			····			-		
			···			-		
	<u> </u>							
	<u> </u>							
	<u></u>							
			•••					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee Third Go Base Rate Fee: Add the Enter here and in block	e base rate	e fees for each subso				\$	0.00	

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
BLO	CK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	I SUBSCRII	BER GROUP			
		SUBSCRIBER GROU		TT .		SUBSCRIBER GROU	JP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9	
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
OALL GIGIT	02	O'NEE O'O'N	DOL	O/ LE OIOIV	DOL	O/ALL OIGIN	DOL	Base Rate F	
								and	
								Syndicate	
								Exclusivit	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
			<u> </u>						
otal DSEs			0.00	Total DSEs			0.00		
ross Receipts First Group		\$	0.00	Gross Receipts Secon	nd Group	\$	0.00		
ase Rate Fee First Group		\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00		
SEVENTY-	FIRST !	SUBSCRIBER GROU	P	SEVENI	TY-SECOND	SUBSCRIBER GROU	IP.		
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0		
CALL SIGN D	SE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
					<del></del>				
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					···				
							•••••		
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otal DSEs			0.00	Total DSEs			0.00		
		•	0.00		o Group				
otal DSEs Gross Receipts Third Group		\$	0.00	Total DSEs Gross Receipts Fourth	n Group	\$	0.00		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
SEV		COMPUTATION O		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	Α		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee and	
								Syndicated	
								Exclusivity Surcharge	
								for	
								Partially Distant	
								Stations	
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	t Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	t Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
SEV	/ENTY-FIFTH	SUBSCRIBER GRO		SEV	/ENTY-SIXTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$			

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	BASE RA	COMPUTATION C	BLOCK A:	B	
_	IP	SUBSCRIBER GROU				SUBSCRIBER GRO			
9 Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA	
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
Base Rate F									
and									
Syndicated									
Exclusivity									
Surcharge									
for									
Partially		_							
Distant		_							
Stations									
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			<b></b>				<del></del>		
	0.00		<u> </u>	T	0.00				
	0.00			Total DSEs	0.00			otal DSEs	
	0.00	\$	l Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro	
	0.00	\$	l Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gro	
	IP	SUBSCRIBER GROU	IGHTIETH	E	IP	SUBSCRIBER GRO	TY-NINTH	SEVEN <sup>-</sup>	
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA	
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	
							<u></u>		
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			<u> </u>				<u> </u>		
	·····				ı				
	0.00			Total DSEs	0.00			otal DSEs	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	otal DSEs Gross Receipts Third Gr	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
CK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								
IRST SUBSCRIBER GROUP EIGHTY-SECOND SUBSCRIBER GROUP								
COMMUNITY/ AREA	0 9							
SE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE Computation							
SE GALE GIGIN BOE GALE GIGIN	Base Rate F							
	and							
	Syndicate							
	Exclusivit							
	Surcharge							
	for							
	Partially							
	Distant Stations							
	Stations							
	0.00							
\$ 0.00 Gross Receipts Second Group \$	0.00							
	<del></del>							
\$ 0.00 Base Rate Fee Second Group \$	0.00							
HIRD SUBSCRIBER GROUP EIGHTY-FOURTH SUBSCRIBER GROUP								
0 COMMUNITY/ AREA	0							
SE CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE							
0.00 Total DSEs	0.00							
	0.00 0.00							

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
EI		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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
								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 GRO				SUBSCRIBER GROU		
COMMUNITY/ AREA	4		0	COMMUNITY/ ARE/	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third	Gross Receipts Third Group \$ 0.00		0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Fourth Group \$ 0.00		0.00		
Base Rate Fee: Add Enter here and in blo			criber group a	II s shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
	BLOCK A:	COMPUTATION C	F BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		NINTIETH SUBSCRIBER GROUP				•
COMMUNITY/ AREA			0	COMMUNITY/ AREA 0			9	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DOE	CALL SIGN	DSE	Base Rate F
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant
								Stations
			····					
otal DSEs	•	<del>'</del>	0.00	Total DSEs	•	-	0.00	
			0.00				0.00	
Base Rate Fee First Group \$ 0.00			0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NINETY-FIRST SUBSCRIBER GROUP				NINETY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	···		····					
			····					
	···		····					
Total DSEs			0.00	Total DSEs		<u> </u>	0.00	
Gross Receipts Third Group \$		0.00	Gross Receipts Fourth Group \$		\$	0.00		
Base Rate Fee Third Group \$		\$	0.00	Base Rate Fee Fourth Group		\$	0.00	
Base Rate Fee Third (  Base Rate Fee: Add the Enter here and in block	ne <b>base rat</b>	e fees for each subsc			· 	\$	0.00	

	060630					SYSTEM: OF ILLINOIS INC		RCN TELECOM SE
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	E
•	Р	SUBSCRIBER GROU				SUBSCRIBER GROU		
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computation of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	DOL	CALL GIGIT	DOL	CALL GIGIT	DOL	OALL SIGIV	DOL	CALL GIGIN
and								
Syndicated								
Exclusivity								
Surcharge								
for								
Partially		<del> </del>				-		
Distant Stations		<u> </u>			<mark>.  </mark>			
Stations		-			·			
		<del> </del>			·			
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gr
	1							
	0.00	\$	d Group	Base Rate Fee Second	0.00	\$	oup	ase Rate Fee First Gr
	Р	SUBSCRIBER GROU	ETY-SIXTH	NINE	JP	SUBSCRIBER GROU	TY-FIFTH	NINE
	0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
							<u>-</u>	
			1					
	0.00			Total DSEs	0.00			otal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	roup	otal DSEs

EES FOR EACH SUBSCRIBER GROUP  NINETY-EIGHTH SUBSCRIBER GROUP  MMUNITY/ AREA  0  Computatio  of  Base Rate Fo  and  Syndicated  Exclusivity  Surcharge  for  Partially  Distant  Stations	H SUBSCRIBER GROUP	NINETY-SEVENTH
NINETY-EIGHTH SUBSCRIBER GROUP  MMUNITY/ AREA  O Computation  ALL SIGN DSE CALL SIGN DSE Base Rate Form  and Syndicated Exclusivity Surcharge for Partially Distant	H SUBSCRIBER GROUP	NINETY-SEVENTH
Computation ALL SIGN DSE CALL SIGN DSE of Base Rate Formula and Syndicated Exclusivity Surcharge for Partially Distant	TI CALL SIGN.	
ALL SIGN DSE CALL SIGN DSE of Base Rate For and Syndicated Exclusivity Surcharge for Partially Distant	CALLOION	MMUNITY/ AREA
Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant	CALL SIGN DS	ALL SIGN DSE
Syndicated Exclusivity Surcharge for Partially Distant	O/ILL GIGIT	ALL CION BOL
Exclusivity Surcharge for Partially Distant		
Surcharge for Partially Distant		
for Partially Distant		
Partially Distant		
Distant		
Stations		
DSEs 0.00	0.0	al DSEs
ss Receipts Second Group \$ 0.00	\$ 0.0	ss Receipts First Group
·		
e Rate Fee Second Group \$ 0.00	\$ 0.0	se Rate Fee First Group
ONE HUNDREDTH SUBSCRIBER GROUP	H SUBSCRIBER GROUP	NINETY-NINTH
MMUNITY/ AREA		MMUNITY/ AREA
ALL SIGN DSE CALL SIGN DSE	CALL SIGN DS	ALL SIGN DSE
<u> </u>		
<u> </u>		
DSEs	0.0	al DSEs
ss Receipts Fourth Group \$ 0.00	\$ 0.0	ss Receipts Third Group
e Rate Fee Fourth Group \$ 0.00	\$ 0.0	se Rate Fee Third Group

LEGAL NAME OF OWNE RCN TELECOM S			С			\$	060630	Name
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUND	RED FIRST	SUBSCRIBER GRO	UP	ONE HUNDR	ED SECOND	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	١		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computatio of
O' LEE GIGIT	DOL	O/ALL SIGIV	DOL	O'ALL GIGIT	502	O'ILL SIGIT	562	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
						-		for
						<u> </u>		Partially
	<del></del>					<u> </u>		Distant
	<del></del>					H		Stations
	<del></del>	<del> </del>				-		
	···	<u> </u>	····			<del> </del>		
otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
<b>ase Rate Fee</b> First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDF	ED THIRD	SUBSCRIBER GRO	UP	ONE HUNDR	ED FOURTH	SUBSCRIBER GROU	JP	
OMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<del></del>							
	····		·····			-		
	···	H	····			<del> </del>		
	<u></u>							
	<del> </del>	-						
	<u></u>							
		<u> </u>						
	···	<u> </u>	····			<u> </u>		
otal DSEs	•		0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	s shown in the boxes a	above.	\$		

LEGAL NAME OF OWNER RCN TELECOM SE			:			5	060630	Name
В	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	H SUBSCRII	BER GROUP		
ONE HUNDR	ED FIFTH	SUBSCRIBER GROU	JP	ONE HUND	ORED SIXTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DOL	CALL SIGN	DSL	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
			<mark></mark>			_		Distant
			<mark></mark>					Stations
			<mark></mark>					
			-					
			<u>-</u>					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE HUNDRED S	SEVENTH	SUBSCRIBER GROU	JP	ONE HUNDR	RED EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<u>.                                    </u>					
			<mark></mark>					
	<b></b>							
						_		
			<mark></mark>					
			-					
			-					
			<u>-</u>					
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
e: Add the	base rate			Base Rate Fee Fourt	· 	\$	0.00	

EGAL NAME OF OWNE			С			\$	060630	Name
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GRO		П		SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	٨		0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O/ LEE GIGIT	BOL	O'ALL SIGIV	BOL	O/ALL SIGIY	BOL	O'ILL SIGIT	562	Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
	···							Stations
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
	•							
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED E	LEVENTH	SUBSCRIBER GRO	UP	ONE HUNDRE	D TWELVTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	<del> </del>	<u> </u>				<u> </u>		
	<del></del>					H		
	<del></del>	<u> </u>				<del>                                     </del>		
						-		
	<u></u>							
	<mark></mark>							
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third C	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
	ne <b>base rat</b>	e fees for each subs		Base Rate Fee Four	·	\$	0.00	

LEGAL NAME OF OWNE RCN TELECOM S			С			\$	060630	Name
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED TH	IRTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED F	OURTEENTH	SUBSCRIBER GROU	JP	•
COMMUNITY/ AREA			0	COMMUNITY/ AREA	·····		0	9 Commutation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
	····		····					Stations
					••••	-		
						-		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
							<del></del>	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED F	IFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	SIXTEENTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						H		
		<u> </u>				<del>                                     </del>		
						-		
						<u> </u>		
						<u> </u>		
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
<b>.</b> . <b>.</b>			2.55					
Base Rate Fee Third (	eroup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNE			С			\$	060630	Name
				TE FEES FOR EAC				
ONE HUNDRED SEVE COMMUNITY/ AREA	NTEENTH	SUBSCRIBER GRO	0 0	11		SUBSCRIBER GROU	JP <b>0</b>	9
COMMUNITY/ AREA	***************************************		<u> </u>	COMMUNITY/ AREA				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
					••••	<del> </del>		Stations
						-		
	····		···					
Total DSEs	•		0.00	Total DSEs	*		0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
	INTEENTH	SUBSCRIBER GRO				SUBSCRIBER GROU		
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 0	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNE			:			\$	060630	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED TWE	ENTY-FIRST	SUBSCRIBER GRO	UP	ONE HUNDRED TWE	NTY-SECOND	SUBSCRIBER GROUP		•
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DOE	CALL SIGN	DOE	Base Rate Fe
			···			<del> </del>		and
•••••	····		···				•••••	Syndicated
			···			-		Exclusivity
	••••				•••••			Surcharge
								for
								Partially
								Distant
								Stations
			<mark></mark>					
			<mark></mark>					
			<mark></mark>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	and Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TWE	NTY-THIRD	SUBSCRIBER GROUP	)	ONE HUNDRED TWE	NTY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					•••••	H		
			<mark></mark>	·		H	·····	
			···			<del>-</del>		
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			···				•••••	
	••••				•••••			
			<mark></mark>					
			<u></u>					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third (	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	II	above.	\$		

LEGAL NAME OF OW RCN TELECOM		E SYSTEM: S <b>OF ILLINOIS INC</b>	;			\$	060630	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROUP		11		SUBSCRIBER GROUP		9
COMMUNITY/ AREA	Α		0	COMMUNITY/ AREA	A		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
			<del></del>			-		Exclusivity Surcharge
		H	···			<del> </del>		for
								Partially
								Distant
			<mark></mark>					Stations
		<u> </u>				-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	: Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	: Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TWEN	NTY-SEVENTH	SUBSCRIBER GROUP	)	ONE HUNDRED TW	ENTY-EIGHTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
			···			-		
			<mark></mark>					
			···					
			···					
							·····	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Thire	d Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			riber group a	II	above.	\$		

RCN TELECOM		E SYSTEM: S <b>OF ILLINOIS INC</b>	;			\$	060630	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED TW	/ENTY-NINTH	SUBSCRIBER GROUP	)	ONE HUNDR	ED THIRTIETH	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	<b>9</b> Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially Distant
		H	<del></del>			H		Stations
		<del>                                     </del>	··· ··································					Otations
		H	···			<del> </del>		
			···			-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED T	HIRTY-FIRST	SUBSCRIBER GROUP	)	ONE HUNDRED TH	IRTY-SECOND	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			<mark>.</mark>			<u> </u>		
			···			-		
			<del></del>					
			<mark></mark>					
						<u> </u>		
			<u></u>			<del> </del>		
Total DSEs	•		0.00	Total DSEs	•		0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
				Ш				
Base Rate Fee: Add Enter here and in blo			riber group a	as shown in the boxes	above.	\$		
i	, ,-	, ,						

O 9 Computation DSE of Base Rate Fe	BER GROUP SUBSCRIBER GROUP					RVICES	
Computation DSE of		SUBSCRIE	TE FEES FOR EACH	BASE RA	COMPUTATION OF	BLOCK A:	В
Computation DSE of		ΓY-FOURTH	ONE HUNDRED THIR		SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED THIR
DSE of			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	CALL SIGN DS	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Dase Nate i	O/ILL GIGIT	DOL	CALL CICIY	BGE	CALL SIGIV	DOL	O, ILL GIGIT
and							
Syndicated							
Exclusivity							
Surcharge							
for							
Partially							
Distant Stations		<b></b>					
Stations	_					<u>-</u>	
		<b>†</b>			-		
0.00	0.0		Total DSEs	0.00			Total DSEs
0.00	\$ 0.0	d Group	Gross Receipts Second	0.00	\$	oup	Gross Receipts First Gro
<del></del>							
0.00	\$ 0.0	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gro
	SUBSCRIBER GROUP	IRTY-SIXTH	ONE HUNDRED TH		SUBSCRIBER GROUP	RTY-FIFTH	ONE HUNDRED THIS
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
DSE	CALL SIGN DS	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
		<del> </del>				<del> </del>	
		<del> </del>				<del> </del>	
		<b>†</b>					
		<b>†</b>					
	0.0		Total DSEs	0.00			otal DSEs
0.00				0.00	•		
0.00	-	Group	Gross Receipts Fourth	0.00	\$	roup	Gross Receipts Third Gr

	YSTEM ID# 060630	8						LEGAL NAME OF OWNER RCN TELECOM SE
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION C	BLOCK A:	E
0		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED THIS		SUBSCRIBER GROUP	'-SEVENTH	ONE HUNDRED THIRTY
9	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
Computatio of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
Base Rate F	DOL	CALL SIGN	DSL	CALL SIGN	DSL	CALL SIGN	DGL	CALL SIGN
and								
Syndicated								
Exclusivity								
Surcharge								
for								
Partially					<mark></mark>			
Distant Stations								
Stations								
	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	\$	roup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	FORTIETH	ONE HUNDRED		SUBSCRIBER GROU	RTY-NINTH	ONE HUNDRED THIS
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	0.00			Total DSEs	0.00			Fotal DSEs
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs Gross Receipts Third G

RCN TELECOM SI			;			S	060630	Name
	BLOCK A:	COMPUTATION O	F BASE RA	ATE FEES FOR EACH	H SUBSCRI	BER GROUP		
ONE HUNDRED FO	RTY-FIRST	SUBSCRIBER GROUP		ONE HUNDRED FOR	RTY-SECOND	SUBSCRIBER GROUP		0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
O, ILL CIOIT	502	O, LEE OTOTA	562	O'NEE GIGIT	562	OF ILLE STORY	562	Base Rate Fe
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Total DSEs		Ш	0.00	Total DSEs		I I	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	nd Group	\$	0.00	
ONE HUNDRED FO	RTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FOI	RTY-FOURTH	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			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			riber group a	as shown in the boxes a	bove.	\$		

RCN TELECOM SER								Name
				TE FEES FOR EACH				
ONE HUNDRED FORT	ΓY-FIFTH	SUBSCRIBER GROUP		TI .		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs		_	0.00	
			0.00		nd Group	\$	0.00	
Gross Receipts First Grou	цр	\$	0.00	Gross Receipts Secon	na Oroup			
Gross Receipts First Grou	лb	\$	0.00	Gross Receipts Secon	па Огоар			
·		\$	0.00	Gross Receipts Secon  Base Rate Fee Secon		\$	0.00	
Base Rate Fee First Grou	ıp	\$	0.00	Base Rate Fee Secon	nd Group		0.00	
Base Rate Fee First Grou	ıp	\$	0.00	Base Rate Fee Secon	nd Group PRTY-EIGHTH	\$ SUBSCRIBER GROUP	0.00	
Base Rate Fee First Grou	ıp	\$	0.00	Base Rate Fee Secon	nd Group PRTY-EIGHTH		0.00	
ONE HUNDRED FORTY-S	ıp	\$	0.00	Base Rate Fee Secon	nd Group PRTY-EIGHTH		0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-S COMMUNITY/ AREA	IP EVENTH	\$ SUBSCRIBER GROUP	0.00	Base Rate Fee Secon ONE HUNDRED FO COMMUNITY/ AREA	nd Group	SUBSCRIBER GROUP	0.00	
ONE HUNDRED FORTY-SI COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	SUBSCRIBER GROUP  CALL SIGN	0.00	Base Rate Fee Second ONE HUNDRED FO COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROUP  CALL SIGN	0.00	
ONE HUNDRED FORTY-S COMMUNITY/ AREA  CALL SIGN	DSE	\$ SUBSCRIBER GROUP	0.00 DSE	Base Rate Fee Second ONE HUNDRED FO COMMUNITY/ AREA	DSE	SUBSCRIBER GROUP	0.00	
COMMUNITY/ AREA	DSE	SUBSCRIBER GROUP  CALL SIGN	0.00	Base Rate Fee Second ONE HUNDRED FO COMMUNITY/ AREA CALL SIGN	DSE	SUBSCRIBER GROUP  CALL SIGN	0.00	
ONE HUNDRED FORTY-SI COMMUNITY/ AREA  CALL SIGN	DSE Up	SUBSCRIBER GROUP  CALL SIGN	0.00	Base Rate Fee Second ONE HUNDRED FO COMMUNITY/ AREA CALL SIGN	DSE h Group	SUBSCRIBER GROUP  CALL SIGN	0.00	

CALL SIGN DSE of Base Rate Fe and Syndicated Exclusivity Surcharge for Partially		TE FEES FOR EACH ONE HUNDREI COMMUNITY/ AREA				E
O Computation  CALL SIGN DSE of Base Rate Ference and Syndicated Exclusivity Surcharge for Partially		ONE HUNDRE				
Computation  CALL SIGN  DSE  of  Base Rate Fe  and  Syndicated  Exclusivity  Surcharge  for  Partially		COMMUNITY/ AREA			I Y-INIIN I H	ONE HUNDRED FOR
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Surcharge for Partially				+		
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0.00		Total DSEs	0.00			otal DSEs
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s 0.00	d Group	Base Rate Fee Second	0.00	\$	oup	Base Rate Fee First Gr
ID SUBSCRIBER GROUP	Y-SECOND	ONE HUNDRED FIFT	IP	SUBSCRIBER GROU	TY-FIRST	ONE HUNDRED FIF
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CALL SIGN DSE	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	Cross					
\$ 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

LEGAL NAME OF OWNE			;			S	060630	Name
		COMPUTATION O		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Commutation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
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T-4-1 D0F-			0.00	T-+-I DOE-			0.00	
Total DSEs Gross Receipts First G	roun	e	0.00	Total DSEs Gross Receipts Seco	nd Group	<u> </u>	0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	na Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
	TY-FIFTH	SUBSCRIBER GRO		ii -		SUBSCRIBER GROU	_	
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	Group	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			riber group a	as shown in the boxes a	bove.	\$		

LEGAL NAME OF OWN RCN TELECOM S			С			•	060630	Name
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	TY-SEVENTH	SUBSCRIBER GROU		i i		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	Computation
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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	
	FIFTY-NINTH	SUBSCRIBER GROU		i i		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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			0.00				2.22	
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			criber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNE RCN TELECOM SE			С				060630	Name
·				TE FEES FOR EAG				
		SUBSCRIBER GRO	UP			O SUBSCRIBER GRO		9
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$ 10,39	1,229.20	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 GRO	UP		FOURT	H SUBSCRIBER GRO	JP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		<b>0</b>	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
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Base Rate Fee Third G	iroup	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
aso Pato Foo: Add th	e <b>base rat</b>		criber group a	as shown in the boxes	above.		0.00	
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Name	060630	S			;			LEGAL NAME OF OWNER RCN TELECOM SE
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	0.00	\$	l Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First Gr
	JP	SUBSCRIBER GROU	EIGHTH		JP	SUBSCRIBER GRO	SEVENTH	
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		\$	Group	Gross Receipts Fourth	0.00	\$	-roup	Gross Receipts Third G
	0.00							

Name	060630					OF ILLINOIS INC		RCN TELECOM SE
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of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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	Į.	SUBSCRIBER GROU		base Rate Fee Secon	,	SUBSCRIBER GROU	-	
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	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	ELEVENTH	E COMMUNITY/ AREA
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	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	ELEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	ELEVENTH	E COMMUNITY/ AREA
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	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	ELEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	ELEVENTH	COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	ELEVENTH	E COMMUNITY/ AREA
	JP <b>0</b>	SUBSCRIBER GROU	TWELVTH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GROU	ELEVENTH	CALL SIGN
	DSE	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA  CALL SIGN	DSE	SUBSCRIBER GROU	DSE	CALL SIGN  CALL SIGN  Fotal DSEs
	DSE O.00	SUBSCRIBER GROU	DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	DSE	CALL SIGN	DSE	E COMMUNITY/ AREA

Name	060630	S			;			LEGAL NAME OF OWNER RCN TELECOM SE
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	JRTEENTH			SUBSCRIBER GRO	IRTEENTH	
Computatio	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	\$	roup	Base Rate Fee First Gr
	IP	SUBSCRIBER GROU	IXTEENTH	5	JP	SUBSCRIBER GRO	IFTEENTH	FI
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LEGAL NAME OF OWNER RCN TELECOM S			С			5	060630	Name
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
SEVI	ENTEENTH	SUBSCRIBER GRO			EIGHTEENTH	H SUBSCRIBER GROU	JP	0
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	<b>9</b> Computation
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oross Neceipis i list c	лоир	4	0.00	Gloss Receipts Sec	ona Group	\$	0.00	
Base Rate Fee First C	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
N	IINTEENTH	SUBSCRIBER GRO	)UP		TWENTIETH	H 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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LEGAL NAME OF OWNER RCN TELECOM SE			;			5	060630	Name
B	LOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EACH	H SUBSCR	IBER GROUP		
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Name	YSTEM ID# 060630				:			LEGAL NAME OF OWNER RCN TELECOM SE
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9		SUBSCRIBER GROU	XTY-SIXTH	H		SUBSCRIBER GRO	XTY-FIFTH	
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	IP	SUBSCRIBER GROU	ΓΥ-EIGHTH	SIXT	JP	SUBSCRIBER GRO	SEVENTH	SIXTY-
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Name	YSTEM ID# 060630						ERVICES	
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RCN TELECOM S			С		SYSTEM ID# 060630		Name	
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
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		R OF CABLE SYSTEM:  SYSTEM ID# RVICES OF ILLINOIS INC  060630						
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9		SUBSCRIBER GROU	Y-SECOND			SUBSCRIBER GRO	HTY-FIRST	
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	0.00			Total DSEs	0.00			Total DSEs
	0.00							
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	-	\$		Gross Receipts Secon	0.00	\$		
	0.00		d Group	Base Rate Fee Secon	0.00		roup	Base Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00 0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G
	0.00 0.00	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon  EIGH  COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G  EIGHTY- COMMUNITY/ AREA
	0.00 0.00	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon  EIGH  COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G  EIGHTY- COMMUNITY/ AREA
	0.00 0.00	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon  EIGH  COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	Base Rate Fee First G  EIGHTY-  COMMUNITY/ AREA
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	0.00 0.00	\$ I SUBSCRIBER GROU	d Group	Base Rate Fee Secon  EIGH  COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	SEVENTH	EIGHTY- COMMUNITY/ AREA  CALL SIGN
	0.00  0.00  JP  DSE	\$ I SUBSCRIBER GROU	DSE	Base Rate Fee Secon  EIGH  COMMUNITY/ AREA  CALL SIGN	0.00  JP  O  DSE	\$ SUBSCRIBER GRO	-SEVENTH  DSE	Base Rate Fee First G  EIGHTY-  COMMUNITY/ AREA

Name	060630							
				TE FEES FOR EACH				
9	JP <b>0</b>	SUBSCRIBER GROU	NINTIETH	COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GRO	H FY-NINTH	EIGH COMMUNITY/ AREA
Computati								
of Base Rate I	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
and					-			
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	0.00		1	Total DSEs	0.00		<u> </u>	Total DSEs
	0.00	\$	d Group	Gross Receipts Seco	0.00	\$	iroup	Gross Receipts First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$		Base Rate Fee First G
		SUBSCRIBER GROU						KUKU
		SUBSCRIBER GROC	Y-SECONE	i i		SUBSCRIBER GRO	ETY-FIRST	
	JP <b>0</b>	SUBSCRIBER GROU	Y-SECOND	NINE* COMMUNITY/ AREA	JP <b>0</b>	SUBSCRIBER GRO	ETY-FIRST	
		CALL SIGN	DSE	i i		CALL SIGN	DSE	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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	0 DSE	CALL SIGN	DSE	COMMUNITY/ AREA  CALL SIGN  Total DSEs	0 DSE	CALL SIGN	DSE	CALL SIGN  CALL SIGN  Fotal DSEs
	DSE		DSE	COMMUNITY/ AREA	DSE		DSE	CALL SIGN

Name	060630	CABLE SYSTEM:  CES OF ILLINOIS INC  O60630  CK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP						
9	JP <b>0</b>	SUBSCRIBER GROU	Y-FOURTH	NINET	JP <b>0</b>	SUBSCRIBER GRO	E [Y-THIRD	NINI COMMUNITY/ AREA
Computat				COMMONT I/ AREA				SOMMONT I/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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				Total DSEs	0.00			Total DSEs
	0.00	-						
	0.00	\$	d Group	Gross Receipts Secor	0.00	\$	Group	Gross Receipts First G
		\$		Gross Receipts Secon	0.00	\$ \$		
	0.00		d Group	Base Rate Fee Secon	0.00		Group	Base Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	0.00 0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	Base Rate Fee First G NIN COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	Base Rate Fee First G NIN COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	Base Rate Fee First G NIN COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	Base Rate Fee First G NIN COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	Base Rate Fee First G NIN COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	Base Rate Fee First G NIN COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	Base Rate Fee First G NIN COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	Base Rate Fee First G NIN COMMUNITY/ AREA
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	Base Rate Fee First G NIN COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group ETY-SIXTH	Base Rate Fee Secon	0.00 JP 0	\$ SUBSCRIBER GRO	ETY-FIFTH	NIN COMMUNITY/ AREA  CALL SIGN
	0.00  0.00  JP  0 DSE	\$ SUBSCRIBER GROU	d Group  ETY-SIXTH  DSE	Base Rate Fee Secon  NIN  COMMUNITY/ AREA  CALL SIGN	0.00  JP  O  DSE	\$ SUBSCRIBER GRO	ETY-FIFTH  DSE	NIN COMMUNITY/ AREA  CALL SIGN  Fotal DSEs
	0.00  0.00  DSE  0.00	SUBSCRIBER GROU	d Group  ETY-SIXTH  DSE  Group	Base Rate Fee Secon  NIN  COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  JP  O  O  O  O  O  O  O  O  O  O  O  O  O	SUBSCRIBER GRO  CALL SIGN	Broup  ETY-FIFTH  DSE  Group	COMMUNITY/ AREA

RCN TELECOM			•	060630	Name			
				TE FEES FOR EAC	H SUBSCR	IBER GROUP		
		SUBSCRIBER GRO		ii ii		SUBSCRIBER GRO		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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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
NIN	NETY-NINTH	SUBSCRIBER GRO	)UP	ONE I	HUNDREDTH	SUBSCRIBER GRO	UP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	as shown in the boxes	above.	\$		

	060630		R OF CABLE	RCN TELECOM SI				
_		BER GROUP	SUBSCRI	TE FEES FOR EACH				
9		SUBSCRIBER GROU	SECOND			SUBSCRIBER GROU	RED FIRST	
Computati	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		1	Total DSEs	0.00			otal DSEs
	0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G
	0.00	\$		Base Rate Fee Secon	0.00	\$		Base Rate Fee First G
_	_	SUBSCRIBER GROU	D FOURTH			SUBSCRIBER GROU	RED THIRD	
	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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  	0.00			Total DSEs	0.00			Fotal DSEs
	_		Crows				Prous	
	0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	
	_	\$	Group			\$	Group	Total DSEs Gross Receipts Third G
  	_	\$	·			\$		

KUN TELECUM SI	ER OF CABLE	OF ILLINOIS INC 06063						
				TE FEES FOR EAC	H SUBSCR	BER GROUP		
	RED FIFTH	SUBSCRIBER GRO		11		SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
		<b> </b>						Syndicate
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED	SEVENTH	SUBSCRIBER GRO	UP	ONE HUND	RED EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
	***************************************							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		CALL SIGN		
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Fotal DSEs		CALL SIGN			DSE	CALL SIGN	DSE	
Fotal DSEs Gross Receipts Third C	Group		0.00	Total DSEs Gross Receipts Four	DSE		0.00 0.00	
tal DSEs	Group		0.00	Total DSEs	DSE		DSE	

RCN TELECOM S		CABLE SYSTEM:  CES OF ILLINOIS INC  060630						
	BLOCK A:	COMPUTATION (	OF BASE RA	TE FEES FOR EAC	H SUBSCR	RIBER GROUP		
ONE HUND	RED NINTH	SUBSCRIBER GRO	)UP	ONE HUNI	DRED TENTI	H SUBSCRIBER GROU	JP	_
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
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otal DSEs	<del>- !</del>		0.00	Total DSEs	·		0.00	
Gross Receipts First C	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First C	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED	ELEVENTH	SUBSCRIBER GRO	)UP	ONE HUNDRE	ED TWELVTI	H SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		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	
Dago Data For Till 1	Orac:		0.00	Base Bets 5:: 5	dh Co		0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	ші Group	\$	0.00	
		e fees for each subsequence L (page 7)	criber group a	as shown in the boxes	above.	\$		

Name	060630		ERVICES	RCN TELECOM S				
				TE FEES FOR EACH				
9		SUBSCRIBER GROU	JRTEENTH			SUBSCRIBER GRO	IRTEENTH	ONE HUNDRED TH
Computation	0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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		\$	d Group	Gross Receipts Secon		*	поир	51000 1 (000)pto 1 (10t 0
		\$		Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	0.00		d Group	Base Rate Fee Secon	0.00		Group	Base Rate Fee First G
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	0.00 0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	Group	Base Rate Fee First G
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	Base Rate Fee First G ONE HUNDRED F COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	Base Rate Fee First G ONE HUNDRED F COMMUNITY/ AREA
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F
	0.00  0.00  JP  0 DSE	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA CALL SIGN	0.00  JP  O  DSE	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F COMMUNITY/ AREA  CALL SIGN
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	ONE HUNDRED COMMUNITY/ AREA	0.00  JP  O  O  O  O  O  O  O  O  O  O  O  O  O	\$ SUBSCRIBER GRO	FIFTEENTH	ONE HUNDRED F COMMUNITY/ AREA  CALL SIGN
	0.00  0.00  JP  0 DSE	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Secon ONE HUNDRED COMMUNITY/ AREA CALL SIGN	0.00  JP  O  DSE	\$ SUBSCRIBER GRO	DSE	ONE HUNDRED F COMMUNITY/ AREA  CALL SIGN  Total DSEs
	0.00  0.00  JP  0 DSE	SUBSCRIBER GROU	d Group  SIXTEENTH  DSE  Group	ONE HUNDRED COMMUNITY/ AREA CALL SIGN  Total DSEs	0.00  JP  O  O  O  O  O  O  O  O  O  O  O  O  O	SUBSCRIBER GRO  CALL SIGN	DSE STOUP	Base Rate Fee First G ONE HUNDRED F COMMUNITY/ AREA

060630	S		LEGAL NAME OF OWNE				
	BER GROUP	SUBSCRI	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	
	SUBSCRIBER GROUP	IGHTEENTH	ONE HUNDRED E		SUBSCRIBER GROUP	ENTEENTH	ONE HUNDRED SEV
0			COMMUNITY/ AREA	0			COMMUNITY/ AREA
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0.00	-		Total DSEs	0.00			otal DSEs
0.00	\$	d Group	Gross Receipts Second	0.00	\$	roup	ross Receipts First G
0.00	\$	d Group	Base Rate Fee Second	0.00	\$	roup	<b>ase Rate Fee</b> First G
IP	SUBSCRIBER GROU	WENTIETH	ONE HUNDRED T	JP	SUBSCRIBER GRO	NTEENTH	ONE HUNDRED N
0			COMMUNITY/ AREA	0			OMMUNITY/ AREA
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN
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LEGAL NAME OF OWNE			;			!	060630	Name
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	CH SUBSCR	IBER GROUP		
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COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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Total DSEs			0.00	Total DSEs		_	0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
<b>Base Rate Fee</b> First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWE	NTY-THIRD	SUBSCRIBER GROUP	)	ONE HUNDRED TW	ENTY-FOURTI	H SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ ARE	Α		0	
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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	
<b>Base Rate Fee:</b> Add t Enter here and in bloc			riber group a	s shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
	BER GROUP	SUBSCRII	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	E	
	TWENTY-FIFTH SUBSCRIBER GROUP  ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP						ONE HUNDRED TWE	
EA 0 COMMUNITY/ AREA 0					COMMUNITY/ AREA			
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0.00			Total DSEs	0.00			otal DSEs	
0.00	\$	d Group	Gross Receipts Secon	0.00	\$	roup	Gross Receipts First G	
0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	a <b>se Rate Fee</b> First G	
	SUBSCRIBER GROUP	NTY-EIGHTH	ONE HUNDRED TWEN		SUBSCRIBER GROUP	Y-SEVENTH	NE HUNDRED TWENTY	
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			Fotal DSEs	
0.00	\$	Group	Total DSEs Gross Receipts Fourth	0.00	\$	Group	Fotal DSEs Gross Receipts Third G	
-	\$	•			\$			
0 0	0.0	0.0 \$ 0.0 \$ 0.0	0.0 d Group \$ 0.0  NTY-EIGHTH SUBSCRIBER GROUP	CALL SIGN DSE CALL SIGN DSI  CALL SI	DSE	CALL SIGN DSE CALL SIGN DSI  CALL SIGN DSE CALL SIGN DSI  DIA CALL SIGN DSI  CALL SIGN DSI  DIA CALL SIGN DSI  CALL SIGN DSI  DIA CALL SIGN DSI  D	DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSI  OUT \$ 0.00  STOUP \$ 0.00  Base Rate Fee Second Group \$ 0.00  COMMUNITY/ AREA	

LEGAL NAME OF OWNE RCN TELECOM S			С				060630	Name
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	H SUBSCR	IBER GROUP		
ONE HUNDRED TWE	ENTY-NINTH SUBSCRIBER GROUP  ONE HUNDRED THIRTIETH SUBSCRIBER GROUP							9
COMMUNITY/ AREA	EA O COMMUNITY/ AREA O					Computati		
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
ase Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED TH	IIRTY-FIRST	SUBSCRIBER GROUI	Р	ONE HUNDRED TH	IRTY-SECONE	SUBSCRIBER GROUP		
OMMUNITY/ 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	Group	\$	0.00	Gross Receipts Fou	th Group	\$	0.00	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
	BLOCK A:	COMPUTATION C	OF BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
		SUBSCRIBER GROUI	Р	ONE HUNDRED TH	IRTY-FOURTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA	REA 0 COMMUNITY/ AREA 0					Computation		
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Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
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sase Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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ONE HUNDRED THE	HIRTY-FIFTH	SUBSCRIBER GRC	0 0	ONE HUNDRED TI	HIRTY-SIXTH	SUBSCRIBER GROU	JP <b>0</b>	
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ONE HUNDRED TH	HIRTY-FIFTH	SUBSCRIBER GRC	0 0	ONE HUNDRED TI	HIRTY-SIXTH	SUBSCRIBER GROU	JP <b>0</b>	
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ONE HUNDRED TH	HIRTY-FIFTH	SUBSCRIBER GRC	0 0	ONE HUNDRED TI	HIRTY-SIXTH	SUBSCRIBER GROU	JP <b>0</b>	
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COMMUNITY/ AREA	HIRTY-FIFTH	SUBSCRIBER GRC	0 0	ONE HUNDRED TI	HIRTY-SIXTH	SUBSCRIBER GROU	JP <b>0</b>	
ONE HUNDRED THE	DSE	SUBSCRIBER GRC	DUP	ONE HUNDRED TI COMMUNITY/ AREA  CALL SIGN	DSE	SUBSCRIBER GROU	JP 0 DSE	
ONE HUNDRED THE COMMUNITY AREA  CALL SIGN  Fotal DSEs  Gross Receipts Third	DSE	SUBSCRIBER GRO	0.00 0.00	ONE HUNDRED TI COMMUNITY/ AREA  CALL SIGN  Total DSEs Gross Receipts Four	DSE th Group	SUBSCRIBER GROU	DSE 0.00 0.00	
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Name	EGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630								
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:	-	
9		SUBSCRIBER GROUP	TY-EIGHTH	ONE HUNDRED THII		SUBSCRIBER GROUP	Y-SEVENTH	ONE HUNDRED THIRTY	
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	0.00	\$		Gross Receipts Secon	0.00	\$			
	0.00		d Group	Base Rate Fee Secon	0.00	\$	roup	a <b>se Rate Fee</b> First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Base Rate Fee First G	
	0.00	\$	d Group	Base Rate Fee Secon	0.00	\$	roup	Dase Rate Fee First G	
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	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon  ONE HUNDRED  COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	roup RTY-NINTH	DNE HUNDRED THIR	
	0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon  ONE HUNDRED  COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	roup RTY-NINTH	DNE HUNDRED THIR	
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon  ONE HUNDRED  COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	roup RTY-NINTH	DIASE RATE FEE FIRST GOOD THIRESE COMMUNITY AREA	
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	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon  ONE HUNDRED  COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	roup RTY-NINTH	Base Rate Fee First G ONE HUNDRED THIR COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon  ONE HUNDRED  COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	roup RTY-NINTH	Base Rate Fee First G ONE HUNDRED THIR COMMUNITY/ AREA	
	0.00 JP 0	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Secon  ONE HUNDRED  COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GRO	roup RTY-NINTH	Gross Receipts First Gross Rate Fee First Gross Rat	
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	0.00	\$ SUBSCRIBER GROU	DSE	Base Rate Fee Secon  ONE HUNDRED  COMMUNITY/ AREA  CALL SIGN	0.00  JP  O  DSE	\$ SUBSCRIBER GRO	DSE	CALL SIGN	

NI	EGAL NAME OF OWNER OF CABLE SYSTEM:  CON TELECOM SERVICES OF ILLINOIS INC  060630									
		BER GROUP	SUBSCRI	TE FEES FOR EAC						
9		SUBSCRIBER GROUP	TY-SECOND			SUBSCRIBER GROUP	RTY-FIRST			
Computat	0		COMMUNITY/ AREA	ITY/ AREA 0			COMMUNITY/ AREA			
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	0	I SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR		
	0	I SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR		
	0	I SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR		
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	0	I SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR		
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	0	I SUBSCRIBER GROUP	TY-FOURTH	ONE HUNDRED FO	0	SUBSCRIBER GROUP	RTY-THIRD	ONE HUNDRED FOR		
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	DSE	I SUBSCRIBER GROUP	DSE DSE	ONE HUNDRED FO COMMUNITY/ AREA  CALL SIGN	DSE	SUBSCRIBER GROUP	DSE	ONE HUNDRED FOR COMMUNITY/ AREA  CALL SIGN  Fotal DSEs		
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630									
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:			
9		FORTY-FIFTH SUBSCRIBER GROUP  ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP								
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	0.00	-		Total DSEs	0.00		-	otal DSEs		
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	0.00	\$ SUBSCRIBER GROUP	d Group	Base Rate Fee Secon  ONE HUNDRED FOR  COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	roup Y-SEVENTH	Sase Rate Fee First Grone HUNDRED FORTY		
	0.00	\$ SUBSCRIBER GROUP	d Group	Base Rate Fee Secon  ONE HUNDRED FOR  COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	roup Y-SEVENTH	Sase Rate Fee First Grone HUNDRED FORTY		
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	0.00	\$ SUBSCRIBER GROUP	d Group	Base Rate Fee Secon  ONE HUNDRED FOR  COMMUNITY/ AREA	0.00	\$ SUBSCRIBER GROUP	roup Y-SEVENTH	Base Rate Fee First Grone HUNDRED FORTY		
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	0.00	\$ SUBSCRIBER GROUP	DSE	Base Rate Fee Secon  ONE HUNDRED FOR  COMMUNITY/ AREA  CALL SIGN	0.00	\$ SUBSCRIBER GROUP	roup  /-SEVENTH  DSE	COMMUNITY/ AREA		

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:  RCN TELECOM SERVICES OF ILLINOIS INC  060630									
		BER GROUP	SUBSCRIE	TE FEES FOR EACH	F BASE RA	COMPUTATION O	BLOCK A:			
9	IP	SUBSCRIBER GROU	O FIFTIETH	ONE HUNDRE	HUNDRED FORTY-NINTH SUBSCRIBER GROUP					
Computation	REA 0 COMMUNITY/ AREA 0				0			COMMUNITY/ AREA		
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN		
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	0.00			T-4-1 DOE	0.00					
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	0.00	\$		Gross Receipts Secon	0.00	\$				
	0.00	\$	d Group		0.00		roup	a <b>se Rate Fee</b> First Gl		
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	0.00	\$ SUBSCRIBER GROU	d Group Y-SECOND	Base Rate Fee Secon ONE HUNDRED FIFT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup FTY-FIRST	ONE HUNDRED FIF		
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	0.00	\$ SUBSCRIBER GROU	d Group Y-SECOND	Base Rate Fee Secon ONE HUNDRED FIFT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup FTY-FIRST	ONE HUNDRED FIF		
	0.00	\$ SUBSCRIBER GROU	d Group Y-SECOND	Base Rate Fee Secon ONE HUNDRED FIFT COMMUNITY/ AREA	0.00 JP 0	\$ SUBSCRIBER GROU	roup FTY-FIRST	ONE HUNDRED FIF		
	0.00	\$ SUBSCRIBER GROU	d Group  Y-SECOND  DSE	Base Rate Fee Second ONE HUNDRED FIFT COMMUNITY/ AREA	0.00  JP  O  DSE	\$ SUBSCRIBER GROU	TOUP  TY-FIRST  DSE	ONE HUNDRED FIF COMMUNITY/ AREA  CALL SIGN  Total DSEs		
	0.00	SUBSCRIBER GROU	d Group  Y-SECOND  DSE	Base Rate Fee Secon  ONE HUNDRED FIFT  COMMUNITY/ AREA  CALL SIGN  Total DSEs	0.00  JP  O  DSE  O  O  O  O  O  O  O  O  O  O  O  O  O	SUBSCRIBER GROU	TOUP  TY-FIRST  DSE	Base Rate Fee First Gr ONE HUNDRED FIF COMMUNITY/ AREA		

Name	EGAL NAME OF OWNER OF CABLE SYSTEM:  CON TELECOM SERVICES OF ILLINOIS INC  060630										
				TE FEES FOR EACH							
9		SUBSCRIBER GROU	Y-FOURTH			ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP					
Computat	0		COMMUNITY/ AREA	IITY/ AREA <b>0</b>			COMMUNITY/ AREA				
of	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
Base Rate											
and											
Syndicate							-				
Exclusivi											
Surcharg for		<del> </del>					····				
Partially		<u> </u>	<u>-</u>				<u></u>				
Distant		<del>-</del>									
Stations			·				···				
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			······································								
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
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	0.00 0.00	\$ SUBSCRIBER GROU	d Group	Base Rate Fee Seco ONE HUNDRED F COMMUNITY/ AREA	0 0	SUBSCRIBER GRO	oup	ONE HUNDRED FIF			
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	EGAL NAME OF OWNER OF CABLE SYSTEM:  CN TELECOM SERVICES OF ILLINOIS INC  060630									
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP				
ONE HUNDRED FIFTY-	SEVENTH	SUBSCRIBER GROUP		11	FTY-EIGHTH	SUBSCRIBER GROUP	0	9		
COMMUNITY/ AREA	JNITY/ AREA <b>0</b>			COMMUNITY/ AREA	Computation					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of		
								Base Rate Fee		
								and		
								Syndicated Exclusivity		
								Surcharge		
								for		
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								Stations		
			<b></b>							
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Total DSEs  Gross Receipts First Gro	oup.	•	0.00	Total DSEs  Gross Receipts Secon	nd Group	<u> </u>	0.00			
Gloss Receipts Filst Git	oup	3	0.00	Gioss Receipis Secoi	id Group	\$	0.00			
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00			
ONE HUNDRED FIFT	Y-NINTH	SUBSCRIBER GROU	Р	ONE HUNDRE	D SIXTIETH	SUBSCRIBER GROU	JP			
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
		-								
	ļ		ļ							
							·····			
Total DSEs	•		0.00	Total DSEs			0.00			
Gross Receipts Third Gr	oup	\$	0.00	Gross Receipts Fourth	n Group	\$	0.00			
Base Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	n Group	\$	0.00			
							1			
Base Rate Fee: Add the Enter here and in block			ber group a	s shown in the boxes al	bove.	\$				

ACCOUNTING PERIOD: 2021/2

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name RCN TELECOM SERVICES OF ILLINOIS INC 060630 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 must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation Second 50 major television market First 50 major television market of INSTRUCTIONS: Base Rate Fee 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. Exclusivity 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 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. FIRST SUBSCRIBER GROUP SECOND 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE THIRD SUBSCRIBER GROUP 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 SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE **SURCHARGE** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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