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
3-1-22	\$ 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	20212				
B Owner	Instructions: Give the full legal name of the owner of the cable system. If the owner is a rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busines If there were different owners during the accounting period, only the owner a single statement of account and royalty fee payment covering the entire accounting the covering the system's first filing. If not, enter the system's ID not.	as of the cable syste on the last day of the unting period.	m. e accounting period should su		61809
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM				
	Consolidated Communications Enterprise Services				
				6180	920212
				61809	20212
	PO Box 455 Mattoon, IL 61938				
С	INSTRUCTIONS: In line 1, give any business or trade names used to id	lentify the busines	s and operation of the syste	m unless t	hese
C	names already appear in space B. In line 2, give the mailing address of	the system, if diffe	erent from the address giver	n in space	В.
System	1 Consolidated Communications Enterprise Services				
	MAILING ADDRESS OF CABLE SYSTEM: 14859 W 95th Street				
	2 (Number, street, rural route, apartment, or suite number) Lenexa, KS 66215-5220				
	(City, town, state, zip code)				
D	Instructions: For complete space D instructions, see page 1b. Identify	only the frst comm	nunity served below and reli	st on page	1b
Area Served	with all communities.	I			
First	CITY OR TOWN LENEXA	STATE KS			
Community	Below is a sample for reporting communities if you report multiple cha		2000 C		
	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUE	GRP#
Sample	Alda	MD	Α		1
Sample	Alliance	MD	В		2
	Gering	MD	В		3

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

DRM SA3E. PAGE 1b.			OVOTEM ID#							
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#							
Consolidated Communications Enterprise Services			61809							
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., or all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9). When reporting the carriage of television broadcast stations on a community-by-commuchannel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns is	e column blank. If elevant community unity basis, associa I a subscriber grou	you report any sta with a subscriber (ate each communit	tions group, y with a							
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	1						
			302 0.1. ;;	Firm						
LENEXA	KS KS	AA		First						
KANSAS CITY	KS	AA		Community						
KANSAS CITY	MO	AA								
MARRIAM	KS	AA								
MISSION	KS	AA								
OLATHE	KS	AA		See instructions for						
OVERLAND PARK	KS	AA		additional information						
PRAIRIE VILLAGE	KS	AA		on alphabetization.						
SHAWNEE	KS	AA								
FAIRWAY	KS	AA								
LEAWOOD	KS	AA								
ROELAND PARK	KS	AA		Add rows as necessary.						
			•••••							

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Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Consolidated Communications Enterprise Services

SYSTEM ID#

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BL	OCK 1		BLOCK 2				
	NO. OF				NO. OF		
CATEGORY OF SERVICE	SUBSCRIBERS		RATE	CATEGORY OF SERVICE	SUBSCRIBERS		RATE
Residential:							
Service to first set	9,918	\$	35.64	HD Set Top Box-Res	124	\$	7.99
 Service to additional set(s) 	10,719	\$	7.99	HD Set Top Box-Bus	295	\$	7.99
 FM radio (if separate rate) 							
Motel, hotel	5,110	\$	35.64				
Commercial	215	\$	35.64				••••••
Converter							
Residential	8,637						••••••
Non-residential	129					ļ	
	***************************************	1				1	

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 1							BLOCK 2		
CATEGORY OF SERVICE RATE			CATEGORY OF SERVICE		CATEGORY OF SERVICE	F	RATE		
Continuing Services:			Installation: Non-residential						
 Pay cable 	\$	35.64	Motel, hotel				DIGITAL TIER	\$	10.00
 Pay cable—add'l channel 	\$	12.00	Commercial				PURCHASE AMP	\$	45.00
 Fire protection 			Pay cable				HD TIER	\$	8.00
Burglar protection			Pay cable-add'l channel						
Installation: Residential			Fire protection						
 First set 	\$	49.99	Burglar protection						
Additional set(s)	\$		Other services:						
 FM radio (if separate rate) 			Reconnect	\$	25.00				
 Converter 			Disconnect	\$	25.00				
			Outlet relocation						
			Move to new address						
									······································

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 61809 Consolidated Communications Enterprise Services 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) **KCTV** 5 Ν No Kansas City, KS **WDAF** Ν No Kansas City, MO 4 See instructions for **KMCI** 38 ı No Lawrence, KS additional information n alphabetization. **KTWU** 11 Ε No Topeka, KS **KSMO** 62.1 Ν No Kansas City, MO KCPT-1 PBS 19.1 Ε No Kansas City, MO **KCPT-2 PBS** 19.2 Ε No Kansas City, MO **KCPT-3 Create** Ε Kansas City, MO 19.3 No **KCPT-4 PBS Kids** 19.4 Ε No Kansas City, MO **KMBC** 9 N No Kansas City, KS Kansas City, MO **KSHB** 41 Ν No **KPXE** I No Kansas City, MO 50 **KCWE** 29 Ī Kansas City, MO No

FURINI SASE, PAGE 3.								
Consolidated C			nrisa Sarvica	26		EM ID# 61809	Name	
PRIMARY TRANSMITTE			prise service			01003		
			ation (including t	translator etations	and law newer television stations)			
· ·			, ,		and low power television stations) I only on a part-time basis under		G	
FCC rules and regulati	ions in effect or	n June 24, 198	31, permitting th	e carriage of certa	in network programs [sections			
				l(e)(2) and (4))]; a	nd (2) certain stations carried on a		Primary	
substitute program bas Substitute Basis S	•			carried by your ca	able system on a substitute program		Transmitters: Television	
basis under specifc FC					,		10.0010.0	
	•		t it in space I (th	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								
					the general instructions located			
in the paper SA3 fo		eian Do not r	enort origination	n program services	seuch as HRO ESPN etc. Identify			
		-			s such as HBO, ESPN, etc. Identify ion. For example, report multi-			
			•	•	stream separately; for example			
WETA-simulcast).	a channel numb	oer the ECC h	as assigned to t	he television stati	on for broadcasting over-the-air in			
			•		may be different from the channel			
on which your cable sy								
					pendent station, or a noncommercial ast), "I" (for independent), "I-M"			
	•	,	,. ,		mmercial educational multicast).			
For the meaning of the								
planation of local servi			•		s". If not, enter "No". For an ex- paper SA3 form			
					tating the basis on which your			
T		-			ering "LAC" if your cable system			
carried the distant stati	•				payment because it is the subject			
					tem or an association representing			
•			•	• .	y transmitter, enter the designa- ner basis, enter "O." For a further			
explanation of these th	ree categories	, see page (v)	of the general i	nstructions locate	d in the paper SA3 form.			
					to which the station is licensed by the	пе		
Note: If you are utilizin				•	which the station is identifed.			
	9		•	•				
		CHANN	EL LINE-UP	AD				
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)				
	NOWIDER	OTATION		(II Distant)				
				 				

FURM SA3E. PAGE 3.				OVOTEM	ID#
LEGAL NAME OF OWNER OF Consolidated Comm		rprise Service	es	SYSTEM 618	Name
PRIMARY TRANSMITTERS: TI	ELEVISION	•			
In General: In space G, iden carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e) substitute program basis, as Substitute Basis Station basis under specifc FCC rule • Do not list the station here is station was carried only o • List the station here, and all basis. For further informating in the paper SA3 form. Column 1: List each station each multicast stream associast stream as "WETA-2". Si WETA-simulcast). Column 2: Give the chan its community of license. For on which your cable system of Column 3: Indicate in each educational station, by enterifor independent multicast), "For the meaning of these termal column 5: If you have encable system carried the distincarried the distant station on For the retransmission of of a written agreement enters the cable system and a primition "E" (exempt). For simulcexplanation of these three caches and the cast of the	atify every television is during the accounting effect on June 24, 19 (2) and (4), or 76.63 (2) and (4), or 76	g period, except (981, permitting the referring to 76.61 paragraph. y distant stations norizations: strict in space I (the ation was carried itute basis station report origination coording to its over the bear of the reported in coording to its over the assigned to the annel 4 in Wash retation is a network	(1) stations carried e carriage of certa (e)(2) and (4))]; are carried by your case. Special Statement both on a substitute, see page (v) of a program services er-the-air designate column 1 (list each the television static ington, D.C. This refer the television static ington, D.C. This refer the television static ington, but the television slocated in the instant"), enter "Yes ons located in the public to a royalty tween a cable systemating the primary channel on any other tructions located ist the community with	atte basis and also on some other the general instructions located as such as HBO, ESPN, etc. Identify ion. For example, report multiparters as tream separately; for example on for broadcasting over-the-air in may be different from the channel opendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). e 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 apacity. 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.	Primary Transmitters: Television
	CHANN	NEL LINE-UP	AC:		
SIGN CH	CAST 3. TYPE HANNEL OF JMBER 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 I	
Consolidated C	ommunicat	ions Enter	prise Service	es	618	09 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 explained	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))]; a	and low power television stations) d only on a part-time basis under hin network programs [sections hd (2) certain stations carried on a hable system on a substitute program	G Primary Transmitters: Television
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Note: If you are utilize	g munipic chai	• •	EL LINE-UP		Блатпет ше-ир.	
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.									
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	Name			
Consolidated C	Communicat	ions Enter	prise Service	es	61809				
PRIMARY TRANSMITTE	RS: TELEVISIO	N							
-					and low power television stations) d only on a part-time basis under	G			
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substitute program bas						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									
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in the paper SA3 fo	rm.	-		,	s such as HBO, ESPN, etc. Identify				
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its community of licens on which your cable sy		,	annel 4 in Washi	ington, D.C. This r	may be different from the channel				
					pendent station, or a noncommercial				
	•	,	,. ,		est), "I" (for independent), "I-M" mmercial educational multicast).				
For the meaning of the	ese terms, see p	page (v) of the	e general instruc	tions located in th	e paper SA3 form.				
Column 4: If the standard planation of local servi			•	•	s". If not, enter "No". For an ex-				
Column 5: If you ha	ave entered "Ye	es" in column	4, you must com	nplete column 5, s	tating the basis on which your				
					ering "LAC" if your cable system				
carried the distant stat For the retransmiss	•				payment because it is the subject				
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Note: If you are utilizing					which the station is identifed. channel line-up.				
		CHANN	EL LINE-UP	AE					
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION				
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION				
	NUMBER	STATION	,	(If Distant)					
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FORM SA3E. PAGE 3.						T
LEGAL NAME OF OWN			nrica Carvica	20	SYSTEM II	Name
			prise service		0100	19
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st	ers: TELEVISIO G, identify every system during the ions in effect or 6.61(e)(2) and (exists, as explaine Stations: With In CC rules, regulate and also in space only on a substand also in space formation concorn. In station's call associated with execution as a substantial execution as a sub	y television stane accounting in June 24, 198 4), or 76.63 (red in the next prespect to any ditions, or authors—but do list titute basis. ace I, if the stanerning substitute sign. Do not red in a station account of the station account of the station. Whether the state of the local service is the local service account of the local service accounting the local service in the local servi	ation (including to period, except of B1, permitting the eferring to 76.61 paragraph. I distant stations orizations: It it in space I (the station was carried ute basis station eport origination cording to its own be reported in comparison of the station is a network ation is a network, "N-M" (for educational), or egeneral instructice area, (i.e. "do	translator stations (1) stations carried e carriage of certa (e)(2) and (4))]; at carried by your case Special Statemed both on a substitute, see page (v) of a program services er-the-air designaticulum 1 (list each the television staticington, D.C. This in the television staticington, an independent of the television of the television of the television of the television staticington, D.C. This in the television staticington, an independent of the television	s". If not, enter "No". For an ex-	G Primary Transmitters: Television
cable system carried the carried the distant state. For the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	ave entered "Ye he distant static ion on a part-tir sion of a distant entered into or a primary transisimulcasts, also aree categories e location of ea Canadian statio	es" in column on during the a me basis becan multicast streen or before Jumitter or an asponenter "E". If y, see page (v) ch station. For ins, if any, give	4, you must con accounting period use of lack of a sam that is not some 30, 2009, be association repressor carried the confidence of the general in the confidence of the name of the lamb of the name of the same same same same same same same sam	nplete column 5, so d. Indicate by ento ctivated channel of ubject to a royalty tween a cable system on any other tructions located list the community with	tating the basis on which your ering "LAC" if your cable system sapacity. 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.	
Note. II you are utilizii	ig multiple chai	• •	EL LINE-UP	•	лаппенше-ир.	_
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#			
Consolidated C	Communicat	ions Enter	prise Service	es	61809	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) d only on a part-time basis under nin network programs [sections	G		
76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program								
basis under specifc FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.								
List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.								
each multicast stream	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- n 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 st	ation is a netwo	rk station, an inde	pendent station, or a noncommercial ast), "I" (for independent), "I-M"			
(for independent multid For the meaning of the	cast), "E" (for no ese terms, see p	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 con	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 of a written agreement	ion on a part-tir ion of a distant entered into or	ne basis beca multicast stre n or before Ju	use of lack of a eam that is not s ne 30, 2009, be	ctivated channel c ubject to a royalty tween a cable sys	apacity. payment because it is the subject tem or an association representing			
tion "E" (exempt). For sexplanation of these th	simulcasts, also ree categories,	enter "E". If y see page (v)	ou carried the o	channel on any oth nstructions located	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			
	Canadian statio	ns, if any, give	the name of th	e community with	which the station is identifed.			
		CHANN	EL LINE-UP	AG				
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>	.		
						.		

FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYS	TEM ID#	Name
Consolidated C	Communicat	ions Enter	prise Service	es		61809	Nume
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
In General: In space of carried by your cable is FCC rules and regulating 76.59(d)(2) and (4), 76.59(d)(2) and (4), 76.59(d)(2) and (4), 76.59(d)(2) and (4), 76.59(d)(2) and substitute Basis is basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 for Column 1: List each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by	G, identify every eystem during the ions in effect or 6.61(e)(2) and (esis), as explaine control of the control	r television stane accounting in June 24, 199 4), or 76.63 (r) d in the next prespect to any attions, or auth G—but do list titute basis. In the stane in a station acceptable or the FCC in the state of the state o	period, except (81, permitting the eferring to 76.61 paragraph. of distant stations orizations: tit in space I (the effect of the effect of th	(1) stations carried e carriage of certa (e)(2) and (4))]; all carried by your case Special Statemed both on a substitute, see page (v) of a program services er-the-air designation to the television station of the television station of the station, an independent of the television and the station of the s	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 and Program Log)—if the ute basis and also on some other in the general instructions located is such as HBO, ESPN, etc. Identify ion. For example, report multisistream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial, "I' (for independent), "I-M" mmercial educational multicast).	,	G Primary Transmitters: Television
Column 4: If the st planation of local servi Column 5: If you had cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give the FCC. For Mexican or Column 6:	ation is outside ice area, see pa ave entered "Ye he distant static ion on a part-tiricion of a distant entered into or a primary transisimulcasts, also aree categories e location of ea Canadian statio	the local servage (v) of the es" in column on during the ame basis becamulticast strength or before Jumitter or an aspect of enter "E". If y, see page (v) ch station. Fo	rice area, (i.e. "d general instructi 4, you must con accounting perio ause of lack of a eam that is not s ne 30, 2009, bet association repres you carried the c of the general in r U.S. stations, I e the name of th	listant"), enter "Yei ons located in the oplete column 5, s od. Indicate by ente ctivated channel of ubject to a royalty tween a cable sys- senting the primar channel on any off onstructions located ist the community with	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. 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 which the station is identifed.		
Note: If you are utilizin	ig mulliple char	• •		•	channei iine-up.		
		CHANN	EL LINE-UP	AH			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

FURIN SAJE. PAGE 3.							
LEGAL NAME OF OWN Consolidated C			nrisa Sarvica	26	S'	4STEM ID# 61809	Name
			prise service			01009	
PRIMARY TRANSMITTERS: TELEVISION							Primary Transmitters: Television
FCC. For Mexican or C Note: If you are utilizin				•	which the station is identifed. channel line-up.		
		CHANN	EL LINE-UP	Al			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		
					<u> </u>		

FORM SA3E. PAGE 3		STEM.			SY	STEM ID#	
Consolidated			prise Service	es	•	61809	Name
PRIMARY TRANSMIT	TERS: TELEVISIO)N	•				
In General: In space carried by your cable FCC rules and regul 76.59(d)(2) and (4), substitute program be substitute program carried to follow the program of the meaning of the planation of local se Column 5: If you cable system carried the distant strong the meaning of a written agreement the cable system and tion "E" (exempt). For explanation of these Column 6: Given	e G, identify every e system during the ations in effect or 76.61(e)(2) and (or 76.61(y television started accounting in June 24, 194, or 76.63 (r din the next respect to any ations, or auth G—but do listitute basis. In the statement of the station acceptance of the station acceptance of the station. Whether the station whether the station. Whether the station acceptance (v) of the station acceptance (v) of the local servage (v) of the local servage (v) of the service of the station. In the station of the station acceptance of the station. In the station of the service of the station of the station of the station. It is see page (v) ch station. For ns, if any, given the station of the station. For ns, if any, given the station of the station of the station.	period, except period, except period, except period, except period, except period peri	(1) stations carried e carriage of certa (e)(2) and (4))]; and (e)(2) and (f)(2); and (f)(3); and (f)(4))]; and carried by your case. Special Statement of both on a substitute, see page (v) of a program services er-the-air designate column 1 (list each column 1 (list each column 1). This is the television statistington, D.C. This is the television statistic ingent of th	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subjectem or an association representing transmitter, enter the designater basis, enter "O." For a further in the paper SA3 form. to which the station is identifed.	a ram r iify n el rcial	G Primary Transmitters: Television
<u> </u>		CHANN	EL LINE-UP	Δ Ι	<u>. </u>		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

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

FORM SA3E. PAGE 3.						1
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID	Name
Consolidated C	Communicat	ions Enter	prise Service	es	61809	
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
PRIMARY TRANSMITTE In General: In space (carried by your cable selection of the selection of a written agreement the cable system and selection of the selection of the selection of a written agreement the cable system and selection of the selection of the selection of a written agreement the cable system and stronger (see parallel system and selection of the s	ERS: TELEVISIO G, identify every system during the ions in effect or 5.61(e)(2) and (esis, as explaine stations: With note that the inspace only on a substant associated with a section of a distant the distant station is outside ion a partial or a primary transistimulcasts, also are categories e location of ea	replace to any to the local service of the local se	ation (including to period, except (81, permitting the eferring to 76.61 paragraph. If distant stations orizations: It it in space I (the ation was carried tute basis station report origination cording to its own to be reported in column as assigned to the annel 4 in Wash ation is a network), "N-M" (for I educational), or a general instructional in	translator stations (1) stations carried e carriage of certa ((e)(2) and (4))]; at a carried by your case e Special Statemed both on a substitute, see page (v) of a program services er-the-air designate column 1 (list each the television statington, D.C. This in the television statingt	and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a suble system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example on for broadcasting over-the-air in may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). the paper SA3 form. s". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	Primary Transmitters: Television
Note: If you are utilizing	ng multiple char	ınel line-ups,	use a separate s	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AK		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
						"
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						"
		<u> </u>				
						"
				 		
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		<u> </u>			 	
		<u> </u>				

LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
Consolidated C	Communicat	ions Enter	prise Service	es	61809	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas	system during the ions 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))]; an	and low power television stations) d only on a part-time basis under hin network programs [sections hd (2) certain stations carried on a hable system on a substitute program	G Primary Transmitters: Television
basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 for 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 multicate manning of the Column 4: If the st planation of local serving Column 5: If you hable system carried the cable system carried the cable system and tion "E" (exempt). For explanation of these the	CC rules, regular here in space only on a substand also in spanformation concurr. ch station's call associated with a-2". Simulcast e channel numbers. For example yetem carried the in each case varieties on is outside ice area, see parave entered "Ye he distant staticition on a part-tirision of a distant the entered into or a primary transisimulcasts, also ince categories, and a substant simulcasts, also ince categories, and a substant simulcasts.	ations, or authors, or a station acceptation as a station acceptation acceptation. The station acceptation are station acceptation, or a station acceptation, or a station, or a station acceptation	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" (fr educational), or e general instruct ice area, (i.e. "d general instruct id, you must con accounting perior accounting perior accounting perior accounting to the special instruction accounting perior a	e Special Statemer both on a substitus, see page (v) of a program services er-the-air designat column 1 (list each the television static ington, D.C. This is rk station, an inde- for network multicar "E-M" (for noncolutions located in the istant"), enter "Ye- ons located in the inplete column 5, s id. Indicate by ente ctivated channel of ubject to a royalty tween a cable sys- senting the primar channel on any oth instructions located	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 may be different from the channel pendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast). is paper SA3 form. is". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your ering "LAC" if your cable system	
FCC. For Mexican or 0 Note: If you are utilizing				-	which the station is identifed. channel line-up.	
		CHANN	EL LINE-UP	AL		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.					
LEGAL NAME OF OWNER OF CABL	E SYSTEM:			SYSTEM ID#	Name
Consolidated Communi	cations Enter	prise Service	es	61809	Name
PRIMARY TRANSMITTERS: TELEV	ISION				
PRIMARY TRANSMITTERS: TELEVI In General: In space G, identify er carried by your cable system durin FCC rules and regulations in effect 76.59(d)(2) and (4), 76.61(e)(2) ar substitute program basis, as explained substitute program basis, with basis under specific FCC rules, reformed to the poor the station here in spatiation was carried only on a set in the station here, and also in basis. For further information or in the paper SA3 form. Column 1: List each station's deach multicast stream associated cast stream as "WETA-2". Simulo WETA-simulcast). Column 2: Give the channel in this community of license. For examon which your cable system carried Column 3: Indicate in each cated additional station, by entering the (for independent multicast), "E" (for the meaning of these terms, sould be system carried the distant station on a parafor the retransmission of a distort with the cable system and a primary tration "E" (exempt). For simulcasts, explanation of these three categorial station of these three categorials.	very television stage the accounting of the accounting of on June 24, 19 and (4), or 76.63 (rained in the next pith respect to any gulations, or authors are G—but do lisubstitute basis. space I, if the stage on the stage on the station accounting substitute as the station account of the station accounting substitute basis. Space I, if the stage on the station accounting substitute basis on the station accounting substitute basis on the station. See whether the station are page (v) of the station of the station during the result of the station during the result of the station during the station during the result of the station during the result of the station during the station during the result of the station during the sta	ation (including to period, except of the second of the se	translator stations (1) stations carried e carriage of certa ((e)(2) and (4))]; and carried by your case e Special Stateme I both on a substitute, see page (v) of an program services er-the-air designat column 1 (list each che television station, p.C. This in the station, an independent of the station, and indicated in the splete column 5, so d. Indicate by enterctivated channel coubject to a royalty tween a cable systemating the primary channel on any other structions located	and low power television stations) I only on a part-time basis under in network programs [sections and (2) certain stations carried on a suble system on a substitute program int and Program Log)—if the sute basis and also on some other if the general instructions located is 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 opendent station, or a noncommercial st), "I" (for independent), "I-M" mmercial educational multicast). e paper SA3 form. is". If not, enter "No". For an ex- paper SA3 form. tating the basis on which your tering "LAC" if your cable system apacity. payment because it is the subject term or an association representing of transmitter, enter the designa- ter basis, enter "O." For a further	G Primary Transmitters: Television
FCC. For Mexican or Canadian st Note: If you are utilizing multiple of			•		
	CHANN	EL LINE-UP	AM		
1. CALL 2. B'CAST SIGN CHANN NUMBE	3. TYPE	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
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FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN	IER OF CABLE SY	'STEM:			SYSTEM ID	Name
Consolidated C	Communicat	ions Enter	prise Service	es	6180	9
PRIMARY TRANSMITTE	RS: TELEVISIO	N				
i i			, -		and low power television stations)	G
		_			d only on a part-time basis under iin network programs [sections	9
_				•	nd (2) certain stations carried on a	Primary
substitute program bas	sis, as explaine	d in the next p	oaragraph.	, , , ,	• •	Transmitters:
				carried by your ca	able system on a substitute program	Television
basis under specifc FCDo not list the station	-			e Special Stateme	ent and Program Log)—if the	
station was carried	only on a subs	titute basis.				
,	•	,			ute basis and also on some other	
in the paper SA3 fo		erriirig substit	ute basis station	is, see page (v) of	the general instructions located	
		-			s such as HBO, ESPN, etc. Identify	
			•	•	ion. For example, report multi- stream separately; for example	
WETA-simulcast).	1-2 . Olillulcast	Sucams musi	be reported in c	Column 1 (list each	i stream separately, for example	
			-		on for broadcasting over-the-air in	
its community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This	may be different from the channel	
, ,			ation is a netwo	rk station, an inde	pendent station, or a noncommercial	
					ast), "I" (for independent), "I-M"	
(for independent multion for the meaning of the					mmercial educational multicast).	
•			•		s". If not, enter "No". For an ex-	
planation of local servi		• , ,	•		• •	
			-	· ·	tating the basis on which your ering "LAC" if your cable system	
carried the distant stati		-		•	-	
					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.	
Note: If you are utilizin						
		CHANN	EL LINE-UP	AN		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	o. Eddy their dr. dr. trion	
	NUMBER	STATION	,	(If Distant)		
						
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LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			SYSTEM ID#	
Consolidated C	Communicat	ions Enter	prise Service	es	61809	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) d only on a part-time basis under	G
76.59(d)(2) and (4), 76 substitute program bas	6.61(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))]; a	ain network programs [sections and (2) certain stations carried on a	Primary Transmitters:
basis under specifc FO	CC rules, regula	itions, or auth	orizations:		able system on a substitute program ent and Program Log)—if the	Television
station was carried • List the station here, basis. For further in	only on a subs and also in spa formation cond	titute basis. ice I, if the sta	ition was carried	both on a substit	ute basis and also on some other f the general instructions located	
each multicast stream	ch station's call associated with	n a station acc	cording to its over	er-the-air designat	s such as HBO, ESPN, etc. Identify iion. For example, report multi- n stream separately; for example	
WETA-simulcast). Column 2: Give the	e channel numb	per the FCC h	as assigned to t	he television stati	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 multi- For the meaning of the Column 4: If the st planation of local servi	cast), "E" (for no ese terms, see p ation is outside ice 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 nonco tions located in th istant"), enter "Ye ons located in the	s". If not, enter "No". For an ex- paper SA3 form.	
cable system carried to carried the distant state For the retransmiss	he distant statio ion on a part-tir sion of a distant	on during the a me basis beca multicast stre	accounting perionals of a care that the care of lack of a care that is not s	d. Indicate by ent ctivated channel o ubject to a royalty	payment because it is the subject	
the cable system and a tion "E" (exempt). For explanation of these th	a primary transi simulcasts, also rree categories	mitter or an as o enter "E". If y , see page (v)	ssociation repres you carried the o of the general in	senting the primar channel on any oth nstructions locate	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	
	Canadian statio	ns, if any, give	e the name of th	e community with	which the station is identifed.	
		CHANN	EL LINE-UP	AO		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	
				,		

LEGAL NAME OF OV		STEM:			SYS	STEM ID#	
Consolidated			prise Service	es	0.0	61809	Name
PRIMARY TRANSMIT	TERS: TELEVISIO)N	<u> </u>				
In General: In space carried by your cable FCC rules and regule 76.59(d)(2) and (4), substitute program be Substitute Pasis basis under specific 1 Do not list the static station was carrie 1 List the station here basis. For further in the paper SA3 Column 1: List ereach multicast stream as "WETA-simulcast). Column 2: Give to its community of lice on which your cable Column 3: Indicated a cast stream as "Indicated a column 3: Indicated a column 4: If the planation of local set Column 5: If you cable system carried the distant stream as "Item and the cable system and tion "E" (exempt). For explanation of these Column 6: Give to	e G, identify every a system during the ations in effect or 76.61(e)(2) and (reasis, as explaines Stations: With a system during the action of a distant station is outside role and a part-tire since a categories the location of ear canadian station stati	r television started accounting in June 24, 194), or 76.63 (r d in the next respect to any ations, or auth G—but do listitute basis. In the state of the station acceptable of the station acceptable of the station acceptable of the station. In a station acceptable of the station. In the station acceptable of the station. In the station acceptable of the station. In the local sendance of the station acceptable of the station acceptable of the station. In the local sendance of the station acceptable of the station acceptable of the station acceptable of the station acceptable of the station. It is see page (v) of the station. For no, if any, given it is a second acceptable of the station. For no, if any, given it is a second acceptable of the station.	period, except 81, permitting the eferring to 76.61 paragraph. of distant stations orizations: to the effect of th	(1) stations carried be carriage of certain (e)(2) and (4))]; and (e)(2) and (4))]; and (e)(2) and (e)(3); and (e)(4))]; and (e)(4) and (e)(5) and (e)(6)	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. 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 which the station is identifed.	nm y Sial	G Primary Transmitters: Television
		CHANN	EL LINE-UP	ΔΡ			
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

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

LEGAL NAME OF OWN	NER OF CABLE SY	'STEM:			SYSTEM ID#	Mana
Consolidated 0	Communicat	ions Enter	prise Service	es	61809	Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
carried by your cable s	system during th	ne accounting	period, except	(1) stations carried	and low power television stations) d only on a part-time basis under hin network programs [sections	G
76.59(d)(2) and (4), 76 substitute program bas	6.61(e)(2) and (sis, as explaine	4), or 76.63 (red in the next p	eferring to 76.61 paragraph.	(e)(2) and (4))]; a	nd (2) certain stations carried on a	Primary Transmitters:
basis under specifc F0				carried by your ca	able system on a substitute program	Television
Do not list the station	here in space	G—but do list		e Special Stateme	ent and Program Log)—if the	
basis. For further in	and also in spa nformation cond	ice I, if the sta			ute basis and also on some other f the general instructions located	
in the paper SA3 for Column 1: List each		sign. Do not r	eport origination	n program services	s such as HBO, ESPN, etc. Identify	
			-	-	ion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams must	be reported in o	column 1 (list each	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	
educational station, by (for independent multi- For the meaning of the Column 4: If the st	entering the le cast), "E" (for no ese terms, see pation is outside	etter "N" (for ne concommercial page (v) of the the local serv	etwork), "N-M" (f educational), o e general instruc rice area, (i.e. "d	or network multica r "E-M" (for nonco ctions located in th listant"), enter "Ye	ast), "I" (for independent), "I-M" mmercial educational multicast). se paper SA3 form. s". If not, enter "No". For an ex-	
planation of local servi		• ()	•		paper SA3 form. Stating the basis on which your	
					ering "LAC" if your cable system	
carried the distant stat	•					
					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.	
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	AQ		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	o. 200, thore of on thore	
	NUMBER	STATION	,	(If Distant)		
		<u> </u>				
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FORM SA3E. PAGE 3.							
LEGAL NAME OF OWN	IER OF CABLE SY	STEM:			;	SYSTEM ID#	Name
Consolidated 0	Communicat	ions Enter	prise Service	es		61809	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream as swcTA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "" (for independent), "I-M" (for independent) multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educat							
of a written agreement the cable system and tion "E" (exempt). For explanation of these th Column 6: Give the	t entered into or a primary transi simulcasts, also nree categories, e location of ea Canadian statio	n or before Ju mitter or an as o enter "E". If y see page (v) ch station. Fo ns, if any, give anel line-ups,	ne 30, 2009, be ssociation repres you carried the of of the general i r U.S. stations, le the name of the	tween a cable sys senting the primar channel on any oth nstructions located list the community the community with space G for each of	tem or an association represe y transmitter, enter the design her basis, enter "O." For a furth d in the paper SA3 form. to which the station is license which the station is identifed.	enting na- her ed by the	
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION		
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION		
	NUMBER	STATION	,	(If Distant)			

LEGAL NAME OF OWN	ER OF CABLE SY	STEM:			S	YSTEM ID#	
Consolidated C			prise Service	es	_	61809	Name
PRIMARY TRANSMITTE	RS: TELEVISIO	N					
carried by your cable s FCC rules and regulati	ystem during the ons in effect or i.61(e)(2) and (4	ne accounting n June 24, 198 4), or 76.63 (r	period, except 81, permitting th eferring to 76.61	(1) stations carried e carriage of certa	and low power television station of only on a part-time basis under the television of television of television of television of television of the television of television	er	G Primary Transmitters:
	stations: With r	espect to any	distant stations	carried by your ca	able system on a substitute pro	gram	Television
· ·	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	tute basis station	ns, see page (v) o	ute basis and also on some oth f the general instructions locate s such as HBO, ESPN, etc. Ide	ed	
each multicast stream	associated with	n a station acc	cording to its over	er-the-air designat	ion. For example, report multi- n stream separately; for exampl		
,	e channel numb	er the FCC h	as assigned to t	the television stati	on for broadcasting over-the-ai	r in	
its community of licens on which your cable sy	•		annel 4 in Wash	ington, D.C. This	may be different from the chanr	nel	
					pendent station, or a noncomm ast), "I" (for independent), "I-M"	ercial	
(for independent multion	cast), "E" (for no	oncommercial	l educational), o	r "E-M" (for nonco	mmercial educational multicast).	
For the meaning of the Column 4: If the sta		- , ,	-		e paper SA3 form. s". If not, enter "No". For an ex-		
planation of local servi		• ,	•		paper SA3 form. tating the basis on which your		
cable system carried th	ne distant statio	on during the	accounting perio	od. Indicate by ent	ering "LAC" if your cable systen	n	
carried the distant stati	•				capacity. payment because it is the subj	ect	
of a written agreement	entered into or	n or before Ju	ne 30, 2009, be	tween a cable sys	tem or an association represen	iting	
•			•	• .	y transmitter, enter the designa ner basis, enter "O." For a furth		
					d in the paper SA3 form. to which the station is licensed	l by the	
FCC. For Mexican or C	Canadian statio	ns, if any, give	e the name of th	e community with	which the station is identifed.	2,	
Note: If you are utilizin	g multiple char	nnel line-ups,	use a separate	space G for each	channel line-up.		
	1	CHANN	EL LINE-UP	AS			
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)			
	-			,			
						<i></i>	
							
							
	I	<u> </u>					

ELGAL NAME CONNECTED CAMES YET THAT DESCRIPTIONS CONSULTATION OF THE MAINTY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC roles and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [seedings of the FCC roles and regulations in effect on June 24, 1981, permitting the carriage of certain network program leaders on a ST (1) (2) and (1) and (2) or translation carried on a ST (1) (2) and (1)) and (2) or translation carried on a ST (1) (2) and (1)) and (2) or translation carried on a station translation carried on the station of the station here in space G—but do list in space (the Special Statement and Program Log—the station was carried by our cable system on a substitute basis and also on some other basis. For translations, or authorizations: - 1 to the station here, and also in space 1, if the station was carried both on a substitute basis and also on some other basis. For translation station was carried by the station of the station. Column 2: Give the charmen turnber the FCC has assigned to the television station for broadcasting over-the-air in the community of tilense. For example, WRC is Channel 4 in Washington, D, C. This nay be different front the channel on which your cable systems carried the station was carried by the station was carr	FORM SA3E. PAGE 3.						
PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 75.59(d)(2) and (4), 76.51(e)(2) and (4), ref.5(e)(2) and (4), ref.5(e)(2) and (4), ref.5(e)(2) and (4)], ref.5(e)(2) and (4) and (Name
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (f) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: 10 not list the station here, and also in space (1 the list this station was carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: 10 not list the station here, and also in space (1 the list station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream substem cases whether the station is an etwork station, an independent station, or a noncommercial educational station, by entering the letter 'N' (for network), 'N-M'' (for network multicast), 'I' (for independent), 'H-M'' (for independent multicast), 'For on example, with the station is clusted the location and the station is an etwork station, an independent station, or a noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located i	Consolidated C	communicat	ions Enter	prise Service	es	61809	
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 AT 1. CALL 2. B'CAST CHANNEL OF CARRIAGE 4. DISTANT? CHANNEL OF CARRIAGE 6. LOCATION OF STATION CARRIAGE	PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76,59(d)(2) and (4), 76,616(e)(2) and (4), 76,63 (referring to 76,61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form. Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast). Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station. Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational) not cable system carried the destant station on a part-time basis because of lack						G Primary Transmitters:
1. CALL 2. B'CAST 3. TYPE 4. DISTANT? 5. BASIS OF CARRIAGE 6. LOCATION OF STATION (Yes or No) CARRIAGE	FCC. For Mexican or 0	Canadian statio	ns, if any, give	e the name of th	e community with	which the station is identifed.	
SIGN CHANNEL OF (Yes or No) CARRIAGE	,		CHANN	EL LINE-UP	AT	·	
		CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	

FORM SA3E. PAGE LEGAL NAME OF	OWNER OF CABLE SY	STEM:			S	YSTEM ID#	
	ed Communicat		prise Service	es	J	61809	Name
PRIMARY TRANSM	IITTERS: TELEVISIO	N					
In General: In spacarried by your cal FCC rules and reg 76.59(d)(2) and (4 substitute Bas basis under specif • Do not list the station was car • List the station was car • List the station hasis. For furth in the paper SA Column 1: List each multicast stream as "W WETA-simulcast). Column 2: Giv its community of lion which your cab Column 3: Indieducational station (for independent in For the meaning of Column 4: If the planation of local significant of local significant carried the distant For the retransion of a written agreer the cable system atton "E" (exempt). explanation of thes Column 6: Giv FCC. For Mexican	ace G, identify every ble system during the pulations in effect or only, 76.61(e)(2) and (on basis, as explaine sis Stations: With refer FCC rules, regulation here in space ried only on a subsitere, and also in spater information concovers form. It each station's call earn associated with retained to the channel number of the system carried the case. For example, le system carried the icate in each case with, by entering the le nulticast), "E" (for not of these terms, see put have entered "Ye is estation is outside service area, see particular and a primary transition of a distant ment entered into on and a primary transition of see three categories et the location of each	r television started accounting in June 24, 194, or 76.63 (in d in the next prespect to any ations, or auth G—but do list titute basis. In the started in a station acceptable station. In a station acceptable station. In the local serve age (v) of the local se	period, except 81, permitting the eferring to 76.6° caragraph. It distant stations orizations: a tit in space I (the effect of the effect of t	(1) stations carried be carriage of certain (e)(2) and (4))]; and (e)(2) and (4))]; and (e)(2) and (e)(3); and (e)(4))]; and (e)(4) and (e)(5) and (e)(6)	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system apacity. payment because it is the subject or an association represently transmitter, enter the designation the paper SA3 form. to which the station is licensed which the station is identifed.	er n a gram er d n iffy e r in nel ercial).	G Primary Transmitters: Television
Note. II you are ut	ilizing multiple char		EL LINE-UP	•	лаппетше-ир.		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION		

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

LEGAL NAME OF OWN	JER OF CABLE SY	'STEM'			SYSTEM	ID#
Consolidated C			prise Service	es		809 Name
PRIMARY TRANSMITTE	ERS: TELEVISIO	N				
In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), 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.						
basis under specifc FC Do not list the station station was carried List the station here, basis. For further ir in the paper SA3 fc Column 1: List eac each multicast stream cast stream as "WETA-WETA-simulcast). Column 2: Give thits community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multi-For the meaning of the Column 4: If the st planation of local serv Column 5: If you h cable system carried the distant station for the retransmiss of a written agreement the cable system and tion "E" (exempt). For explanation of these the Column 6: Give the	CC rules, regular here in space only on a substant also in spation and also in spation and also in spation. The station's call associated with A-2". Simulcast e channel numbers, as a sociated with a se. For example ystem carried the in each case was a see terms, see pation is outside ice area, see pation is outside ice area, see pation is outside ice ice area, see pation of a distant static icin on a part-tirision of a distant at entered into or a primary transi simulcasts, also ree categories e location of ea Canadian statio	ations, or auth G—but do list titute basis. Ince I, if the state erning substitute sign. Do not read a station acceptate a station acceptate a station. In a station acceptate a station are basis because a local server and a station acceptate a station acceptate a station acceptate a station. In a station acceptate a station. In a station acceptate a station acceptate a station. For an acceptate a station acceptate a station. For ans, if any, given a station acceptate acceptate a station acceptate acceptate acceptate a station acceptate acceptate a station acceptate acceptate a station acceptate a station acceptate acceptate acceptate a station acce	orizations: tit in space I (the tition was carried tute basis station report origination cording to its own be reported in co as assigned to to annel 4 in Wash ation is a networ etwork), "N-M" (for educational), or e general instruct vice area, (i.e. "do general instruct 4, you must con accounting peric ause of lack of a earn that is not s one 30, 2009, be essociation repres you carried the co of the general in r U.S. stations, I e the name of the	e Special Statemer I both on a substitus, see page (v) of a program services er-the-air designat column 1 (list each the television stati- ington, D.C. This ington, D.C. This rk station, an inde for network multical r "E-M" (for nonco- stions located in the instant"), enter "Ye ons located in the inplete column 5, s od. Indicate by ent- ctivated channel of ubject to a royalty tween a cable sys senting the primar channel on any oth instructions locate- list the community ite community with	s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system sapacity. 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.	Television
		CHANN	EL LINE-UP	AV		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OW					SYSTEMI	Name
Consolidated (Communicat	ions Enter	prise Service	es	618	09
PRIMARY TRANSMITT	ERS: TELEVISIO	N				
In General: In space	G, identify every	television sta	ation (including t	translator stations	and low power television stations)	
		-			l only on a part-time basis under	G
				•	in network programs [sections	
76.59(d)(2) and (4), 70 substitute program ba	. , . ,	,	-	l(e)(2) and (4))]; ai	nd (2) certain stations carried on a	Primary Transmitters:
. •			• .	carried by your ca	able system on a substitute program	Television
basis under specifc F				,,	,	
	•		t it in space I (th	e Special Stateme	nt and Program Log)—if the	
station was carried	•		tion was sarried	l bath an a aubatit	its basis and also an same other	
· ·	•				te basis and also on some other the general instructions located	
in the paper SA3 for		og oasout		is, see page (1) s.	and general mendenene recated	
					such as HBO, ESPN, etc. Identify	
					ion. For example, report multi-	
cast stream as "WETA WETA-simulcast).	A-2". Simulcast	streams must	be reported in o	column 1 (list eacr	stream separately; for example	
,	e channel numb	er the FCC h	as assigned to t	the television station	on for broadcasting over-the-air in	
its community of licen	se. For example	e, WRC is Cha	annel 4 in Wash	ington, D.C. This i	may be different from the channel	
on which your cable s	•					
					pendent station, or a noncommercial	
					st), "I" (for independent), "I-M" mmercial educational multicast).	
For the meaning of the	ese terms, see p	page (v) of the	e general instruc	ctions located in th	e paper SA3 form.	
					s". If not, enter "No". For an ex-	
planation of local serv		• , ,	•		• •	
· ·			-	· ·	tating the basis on which your ering "LAC" if your cable system	
carried the distant sta		_		•		
	•				payment because it is the subject	
of a written agreemen	t entered into or	n or before Ju	ne 30, 2009, be	tween a cable sys	tem or an association representing	
					y transmitter, enter the designa-	
					er basis, enter "O." For a further d in the paper SA3 form.	
					to which the station is licensed by the	
FCC. For Mexican or	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	nel line-ups,	use a separate :	space G for each	channel line-up.	
		CHANN	EL LINE-UP	AW		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE	0. LOCATION OF STATION	
CION	NUMBER	STATION	` ,	(If Distant)		
				(,		
				<u> </u>		
		l				

ACCOUNTING PERIOD: 20212 FORM SA3E. PAGE 4.

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 61809 Consolidated Communications Enterprise Services 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

FORM SA3E. PAGE 5. ACCOUNTING PERIOD: 20212

LEGAL NAME OF OWNER OF	CABLE SYST	EM:			•	SYSTEM ID#	
Consolidated Commun			Services			61809	Name
SUBSTITUTE CARRIAGE	E: SPECIA	L STATEME	NT AND PROGRAM LOG	;			_
In General: In space I, ident substitute basis during the ar explanation 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					·		Carriage:
During the accounting per	_			is, any nonne	etwork television program	า	Special Statement and
broadcast by a distant stat		•	•	·	Yes		Program Log
Note: If your answer is "No	", leave the	rest of this pag	ge blank. If your answer is '	"Yes," you m	ust complete the prograr	n	
log in block 2.							
2. LOG OF SUBSTITUTE In General: List each subst			ite line. Use abbreviations	wherever pos	ssible if their meaning is	•	
clear. If you need more spa	ice, please	attach addition	al pages.		-	,	
Column 1: Give the title period, was broadcast by a			ision program (substitute p			tion	
under certain FCC rules, re						uon	
SA3 form for futher informa				"basketball"	. List specific program		
titles, for example, "I Love L Column 2: If the program			r "Yes." Otherwise enter "N	lo."			
Column 3: Give the call	sign of the	station broadca	asting the substitute progra	m.			
the case of Mexican or Can			ne community to which the community with which the				
Column 5: Give the mon	nth and day		tem carried the substitute			th	
first. Example: for May 7 giv		s substitute pro	gram was carried by your o	cable evetem	List the times accurated	V	
to the nearest five minutes.						у	
stated as "6:00–6:30 p.m."	"D" : 6 41.	E. t. d					
to delete under FCC rules a			was substituted for prograuring the accounting period			1	
gram was substituted for pr	ogramming						
effect on October 19, 1976.							
				WHI	EN SUBSTITUTE	7. REASON	,
S		E PROGRAM	1		IAGE OCCURRED	FOR	
TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	DELETION	
					_		
	 						
	 						
	 						
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ACCOUNTING PERIOD: 20212 FORM SA3E. PAGE 6.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services SYSTEM ID# 61809							SYSTEM ID#	
Name									
	PART-TIME CARRIAGE LOG								
J Part-Time	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								
Carriage	column 5 of spa		of carriage): For	each station list	the o	dates and hours	when part-time	carriage oc-	
Log	curred during th	e accounting pe	eriod.				•	-	
	• Give the mont "4/10."	h and day when	the carriage occu	rred. Use numera	ls, w	ith the month firs	st. Example: for	April 10 give	
	State the start							ran to the end of t	he
		n's broadcast da : "12:30 a.m.– 3	ay, you may give a	n approximate en	ding	hour, followed b	y the abbreviati	on	
			: เธ a.m. app. lates when the hoเ	ırs of carriage we	re th	e same. Exampl	e: "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	URRED		CALL SIGN	WHE	N CARRIAGE OCC	URRED
	CALL SIGN		HOU			CALL SIGN		HOU	
		DATE	FROM	TO			DATE	FROM	ТО
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LEGA	L NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Nama		
Coi	nsolidated Communications Enterprise Services		61809	Name		
Inst all a (as i page	COSS RECEIPTS ructions: 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 second dentifed in space E) during the accounting period. For a further explanation of how to context (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. ORTANT: You must complete a statement in space P concerning gross receipts.	dary tran	smission service s amount, see \$ 1,352,436.40	K Gross Receipts		
IIVIF	OKTANT. Tou must complete a statement in space P concerning gross receipts.	()	Amount of gross receipts)			
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: Complete block 1, showing your minimum fee. Complete block 2, showing whether your system carried any distant television stations. 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. 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.						
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be ϵ k 3 below.	entered c	on line 1 of			
▶ If pa	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be ent low.	tered on	line 2 in block			
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should block 4 below.	d be ente	ered on line			
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period.	•	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	-	\$ 1,352,436.40			
	Enter the result here.		11.000.00			
	This is your minimum fee.	\$	14,389.92			
2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the in space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in column "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period Yes—Complete the DSE schedule. No—Leave block 3 below blank and column 1. BASE RATE FEE: Enter the base rate fee from either part 8, section 3 or	4, you m	nust check ne 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 schedule. If none, enter zero	_	0.00			
	Line 3. Add lines 1 and 2 and enter here	\$	-			
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger	_	\$ 14,389.92	Cable systems		
	Line 2. SYNDICATED EXCLUSIVITY SURCHARGE: Enter the fee from either part 7 (block D, section 3 or 4) or part 9 (block B) of the DSE schedule. If none, enter		0.00	submitting additional		
	zero. Line 3. Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet)	_	0.00	deposits under Section 111(d)(7) should contact the Licensing		
	Line 4. FILING FEE	_	\$ 725.00	additional fees. Division for the		
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here	\$	15,114.92	appropriate form for submitting the		
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. (Se general instructions located in the paper SA3 form for more information.)	ee page ((i) of the	additional fees.		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Consolidated Communications Enterprise Services	61809
	Onsolitation Communications Enterprise Cervices	
	CHANNELS	
M	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.	
Channels		
	Enter the total number of channels on which the cable	13
	system carried television broadcast stations	13
	Enter the total number of activated channels	
	on which the cable system carried television broadcast stations	274
	and nonbroadcast services	217
		_
NI	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual	
N	we can contact about this statement of account.)	
Individual to	, , , , , , , , , , , , , , , , , , , ,	
Be Contacted		
for Further	Name Julie Poon Telephone 916-78	36-1034
Information		
	Address 211 Lincoln Street (Number, street, rural route, apartment, or suite number)	
	(Number, street, rural route, apartment, or suite number)	
	Roseville, CA 95678	
	(City, town, state, zip)	
	5 / / / / / / / / / / / / / / / / / / /	
	Email julie.poon@consolidated.com Fax (optional)	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Office regulations.)	
0	,	
Certifcation	I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
Certification	1, the undersigned, hereby certally that (officer one, but only one, of the boxes.)	
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or	
	(White date than corporation of parties sinp) rain the owner of the casic system as identified in line 1 or 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 in line 1 of space B and that the owner is not a corporation or partnership; or	dentified
	in line 1 of space B and that the owner is not a corporation of partnership, of	
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identifed as owner of the co	able system
	in line 1 of space B.	
	I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein	
	are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith.	
	[18 U.S.C., Section 1001(1986)]	
	/s/ Michael Shultz	
	X Norman State	
	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 a	
	button, then type /s/ and your name. Pressing the "F" button will avoid enabling Excel's Lotus compatibility set	tings.
	Typed or printed name: Michael Shultz	
	rypod or printed name. Intertact official	
	Title: VP-Regulatory & Public Policy	
	(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 CABLE SYSTEM:	SYSTEM ID#	Name
Consolidated Communications Enterprise Services	61809	
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by addin lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for th service of providing secondary transmissions of primary broadcast transmitters, the system shall not in scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section	e basic nclude sub-	P Special Statement Concerning
For more information on when to exclude these amounts, see the note on page (vii) of the general instruction paper SA3 form.		Gross Receipts Exclusion
During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmade by satellite carriers to satellite dish owners?	smissions	
X NO		
YES. Enter the total here and list the satellite carrier(s) below		
Name Mailing Address Mailing Address Mailing Address		
INTEREST ASSESSMENTS		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or under For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.	erpayment.	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	-	
Line 3 Multiply line 2 by the number of days late and enter the sum here	days -	
x 0	.00274	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7)		
	est charge)	
* To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf . For further assista contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	nce please	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.		
NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Off please list below the owner, address, first community served, accounting period, and ID number as given in t filing.	·	
Owner		
Address		
First community served		
Accounting period		
ID number		

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on 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: 20212

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
\ an	ns B, D, d E le zone	-

Distant Stations Cari	ried	Identification	of Subscriber Groups	_
STATION	DSE	CITY	OUTSIDE LOCAL	GROSS RECEIPTS
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

linimum 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)

DSE SCHEDULE. PAGE 11. (CONTINUED)

DSE SCHEDULE. PAGE						STEM ID#		
1								
•	Consolidated Communications Enterprise Services 6180							
	SUM OF DSEs OF CATEGORY "O" STATIONS:							
	Add the DSEs of each station.							
	Enter the sum here and in line		0.00					
	Instructions: In the column headed "Call S	ian": list the cal	I signs of all distant stations i	identified by th	e letter "O" in column 5			
	of space G (page 3).	igii . iist tile cai	i signis of all distant stations i	dentined by the	c ictici O ili coldilili o			
Computation In the column headed "DSE": for each independent station, give the DSE as "1.0"; for each network or noncom-								
of DSEs for	mercial educational station, give	e the DSE as ".2	5."					
Category "O"	CATEGORY "O" STATIONS: DSEs							
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Add rows as								
necessary.								
Remember to copy all								
formula into new								
rows.								
10113.								

•	l			L		l		

ļ	 	P	~ · · · · · · · · · · · · · · · · · · ·	

Name		WNER OF CABLE SYSTEM: I Communications E	interprise S	ervices			S	61809
Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel	Column 2: figure should c Column 3: Column 4: be carried out Column 5: give the type-v Column 6:	t the call sign of all distar For each station, give the correspond with the inform For each station, give the Divide the figure in colu- at least to the third decim For each independent stalue as ".25."	ne number of the mation given in the total number mn 2 by the figural point. This station, give the fumn 4 by the fumn 4 by the	hours your cable syster n space J. Calculate or er of hours that the stati gure in column 3, and g is the "basis of carriage e "type-value" as "1.0."	n carried the stati nly one DSE for ea on broadcast ove give the result in d e value" for the st For each network	oon during the accounting pach station. r the air during the accour lecimals in column 4. This	nting period. figure must tional station,	
Capacity		(CATEGOR'	Y LAC STATIONS:	COMPUTATI	ON OF DSEs		
	1. CALL SIGN	2. NUMBE OF HOU CARRIE SYSTEN	JRS ED BY M	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAG VALUE	SE VALUE		Ε
			÷		=	x x	=	
			÷		=	x	=	
			÷		=	x	=	
			÷		=	x x	=	
			÷		=	x	=	
			÷		=	x	=	
	Add the DSEs of	OF CATEGORY LAC ST of each station. on here and in line 2 of pa		hedule,		0.00		
Computation of DSEs for Substitute-Basis Stations	• Was carried tions in effer • Broadcast or space I). Column 2: F at your option. T Column 3: E Column 4: E	ct on October 19, 1976 (and or more live, nonnetwo for each station give the This figure should correst enter the number of days Divide the figure in colum	itution for a pro as shown by the ork programs de number of live spond with the in the calenda in 2 by the figu	ogram that your system he letter "P" in column a luring that optional carri e, nonnetwork programs information in space I. ar year: 365, except in a ure in column 3, and giv	was permitted to 7 of space I); and age (as shown by t s carried in substi a leap year. we the result in col	ograms) if that station: delete under FCC rules a he word "Yes" in column 2 o tution for programs that w umn 4. Round to no less t ie general instructions in the	f ere deleted han the third).
		Sl	JBSTITUTE	E-BASIS STATION	NS: COMPUTA	ATION OF DSEs		
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMB OF DA' IN YEA	YS	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
		÷		=		÷		=
		-		=		÷		=
			÷	=		÷		=
		-	+	=		÷		=
	Add the DSEs of	• OF SUBSTITUTE-BASI of each station. n here and in line 3 of pa	S STATIONS:		▶	0.00		=
5		R OF DSEs: Give the amo		boxes in parts 2, 3, and	4 of this schedule	and add them to provide th	e total	
Total Number	1. Number	of DSEs from part 2 ●					0.00	
of DSEs	2. Number	of DSEs from part 3 ●				<u> </u>	0.00	
	3. Number	of DSEs from part 4 ●				-	0.00	
								
	TOTAL NUMBER	R OF DSEs						0.00

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 20212

LEGAL NAME OF O	WNER OF CABLE S		rise Service	s			S	YSTEM ID# 61809	Name
In block A: • If your answer if schedule.	ck A must be comp "Yes," leave the re "No," complete blo	mainder of pa		of the DSE schedu	ıle blank and	complete part t	8, (page 16) of the		6
j	· · ·			TELEVISION MA	ARKETS				Computation of
effect on June 24, Yes—Com	1981?	schedule—D	•	er markets as defin LETE THE REMAIN			C rules and regula	tions in	3.75 Fee
		BLO	CK B: CARF	RIAGE OF PERM	MITTED DS	Es			
Column 1: CALL SIGN	FCC rules and re	of distant sta egulations prione DSE Scheo	ations listed in por to June 25, 1	part 2, 3, and 4 of the 981. For further ex e letter M below ref	nis schedule t planation of p	hat your syster permitted station	ns, see the	Ţ	
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)] B Specialty static C Noncommeric D Grandfathered instructions fo E Carried pursua *F A station pre-	ed pursuant to on as defined al educationa d station (76.6 or DSE schedi ant to individu viously carrie JHF station w	ations cited be to the FCC mark in 76.5(kk) (76.1 station [76.5985) (see paragrule). It was a part-time ithin grade-B contact and the station of FC don a part-time ithin grade-B contact and the station of FC don a part-time grade-B contact and the station of FC don a part-time grade-B contact and the station of FC don and the stat	e or substitute basis ontour, [76.59(d)(5)	e in effect on 57, 76.59(b), (1), 76.63(a) 8(a) referring stitution of gra	June 24, 1981. 76.61(b)(c), 76 referring to 76.4 to 76.61(d)] andfathered sta	.63(a) referring to 61(e)(1) tions in the		
Column 3:		e stations ide	ntified by the le	parts 2, 3, and 4 of tter "F" in column 2			ksheet on page 14	lof	
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	
			BLOCK C: CC	OMPUTATION OF	3.75 FEE				
Line 1: Enter the	total number of							-	
Line 2: Enter the	sum of permitted	d DSEs from	n block B abov	/e				<u>-</u>	
				of DSEs subject t of this schedule)		ate.		0.00	
Line 4: Enter gro	ess receipts from	space K (pa	age 7)				x 0.03	375	Do any of the DSEs represent
Line 5: Multiply li	ine 4 by 0.0375 a	ınd enter suı	n here				,		partially permited/ partially nonpermitted
Line 6: Enter tota	al number of DSE	Es from line	3					<u>-</u>	carriage? If yes, see part 9 instructions.
I ine 7: Multiply li	ine 6 by line 5 an	d enter here	and on line 2	. block 3. space L	(page 7)			0.00	3

LEGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services 61809									
		BLOCK	A: TELEVIS	SION MARKETS	(CONTINI	UED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computation of 3.75 Fee
									
						•			
						•••••			

ACCOUNTING PERIOD: 20212

DSE SCHEDULE. PAGE 14.

Mana	LEGAL NAME OF OWN					SYSTEM ID#						
Name	Consolidated C	ommunications	Enterprise Services			61809						
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections 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.											
	Statement of account on he in the Licensing Division.											
		PERMITTED DS	E FOR STATIONS CARE	RIED ON A PART-T	IME AND SUBSTITUTE BASIS	}						
	1. CALL											
	SIGN	DSE	PERIOD	CARRIAGE	E DSE	DSE						
7 Computation of the	-	'Yes," complete block	s B and C, below. and C blank and complete	part 8 of the DSE s	chedule.							
Syndicated			BLOCK A: MAJOR	R TELEVISION N	MARKET							
Exclusivity Surcharge		able system within a to	op 100 major television ma		ction 76.5 of FCC rules in effect ceed to part 8	June 24, 1981?						
	BLOCK B: Ca	arriage of VHF/Grade	B Contour Stations		BLOCK C: Computation of Ex	empt DSEs						
	Is any station listed in commercial VHF static or in part, over the cab	block B of part 6 the on that places a grade	orimary stream of a B contour, in whole	nity served by to former FCC	Was any station listed in block B of part 7 carried in any community served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) Yes—List each station below with its appropriate permitted DSE							
	X No—Enter zero ar	nd proceed to part 8.		X No—Ente	r zero and proceed to part 8.							
	CALL SIGN	DSE C/	ALL SIGN DSE	CALL SIG	GN DSE CALL	SIGN DSE						
		то	TAL DSEs 0.00	<u> </u>	TOTAL	. DSEs 0.00						
				-								

LEGAL NA	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
	Consolidated Communications Enterprise Services	61809	
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	1,352,436.40	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. X No—Complete section 4 below.		
	SECTION 3: TOP 50 TELEVISION MARKET		
Section 3a	Did your cable system retransmit the signals of any partially distant television stations during the accounting period? Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.		
	A. Enter 0.00599 of gross receipts (the amount in section1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Subtract 1.000 from total permitted DSEs (the figure on		
	line C in section 2) and enter here	_	
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
Section 3b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 3a blank.		
	A. Enter 0.00599 of gross receipts (the amount in section 1)		
	B. Enter 0.00377 of gross receipts (the amount in section 1)		
	C. Multiply line B by 3.000 and enter here		
	D. Enter 0.00178 of gross receipts (the amount in section 1)		
	E. Subtract 4.000 from total DSEs (the fgure on line C in section 2) and enter here		
	F. Multiply line D by line E and enter here		
	G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		
	SECTION 4: SECOND 50 TELEVISION MARKET		
	Did your cable system retransmit the signals of any partially distant television stations during the accounting period?		
Section 4a	X Yes—Complete part 9 of this schedule. No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)		
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

Name	LEGAL NAM	ME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#							
Ivaille	(Consolidated Communications Enterprise Services	61809							
7	Section 4b	If the figure in section 2, line C is more than 4.000, compute your surcharge here and leave section 4a blank.								
Computation		A. Enter 0.00300 of gross receipts (the amount in section 1)								
of the Syndicated		B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$								
Exclusivity Surcharge		C. Multiply line B by 3.000 and enter here								
		D. Enter 0.00089 of gross receipts (the amount in section 1)								
		E. Subtract 4.000 from the total DSEs (the figure on line C in section 2) and enter here.								
		F. Multiply line D by line E and enter here								
		G. Add lines A, C, and F. This is your surcharge. Enter here and on line 2, block 4, space L (page 7)								
		Syndicated Exclusivity Surcharge								
Computation of Base Rate Fee	You m 6 was In blo If you If you blank What i	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of particle of the Sum of part 5. Dock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. Duranswer is "No," compute your system's base rate fee in block B. Leave part 9 blank. Duranswer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B be in the station of a station of the station's "located within that station's local service area and others were located outside that area. For the definition of a station's "located area," see page (v) of the general instructions.	low							
		BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS								
	• Did y	our cable system retransmit the signals of any partially distant television stations during the accounting period?								
		Yes—Complete part 9 of this schedule. X No—Complete the following sections.								
	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE									
	Section 1	Enter the amount of gross receipts from space K (page 7)	6.40_							
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶	0.00							
	Section 3	If the figure in section 2 is 4.000 or less , compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.								
		A. Enter 0.01064 of gross receipts (the amount in section 1)	<u>-</u>							
		B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ _ \$ 9,480.58								
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here								
		D. Multiply line B by line C and enter here	<u>-</u>							
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7)								
		Base Rate Fee	<u> </u>							

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 20212

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Consolidated Communications Enterprise Services	61809	
Section If the figure in section 2 is more than 4.000 , compute your base rate fee here and leave section 3 blank.		_
A. Enter 0.01064 of gross receipts		8
(the amount in section 1) ▶		
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		
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	
IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of telev instead be reported on a community-by-community basis (subscriber groups) if the cable system reported m Space G.	<u> </u>	9
In General: If any of the stations you carried were partially distant, the statute allows you, in computing your	base rate fee, to exclude	C
receipts from subscribers located within the station's local service area, from your system's total gross recei	pts. To take advantage of this	Computation of
exclusion, you must:		Base Rate Fee
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that		and Syndicated
station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable systel DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate ba		Exclusivity
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for you	· ·	Surcharge for
NOTE: If any portion of your cable system is located within the top 100 television market and the station is n also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both blo		Partially Distant
if your cable system is wholly located outside all major television markets, complete block A only.		Stations, and for Partially
How to Identify a Subscriber Group for Partially Distant Stations Step 1: For each community served, determine the local service area of each wholly distant and each partia	Illy distant station you	Permitted Stations
carried to that community.	ily distant station you	Stations
Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscoutside the station's local service area. A subscriber located outside the local service area of a station is distinct the same token, the station is distant to the subscriber.)		
Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which the	y are distant. Each	
subscriber group must consist entirely of subscribers who are distant to exactly the same complement of sta system will have only one subscriber group when the distant stations it carried have local service areas that		
Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each groups.	h of your system's subscriber	
In each section:		
• Identify the communities/areas represented by each subscriber group.		
• Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is subscribers in the group.	s distant to all of the	
• If:		
1) your system is located wholly outside all major and smaller television markets, give each station's DSE as 4 of this schedule; or,	you gave it in parts 2, 3, and	
2) any portion of your system is located in a major or smaller televison market, give each station's DSE as you part 6 of this schedule.	ou gave it in block B,	
Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group.		
• Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of in the paper SA3 form.	f the general instructions	
Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this sch		
page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscr DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). Y actual calculations on the form.		

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 61809 **Consolidated Communications Enterprise Services** 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 Consolidated Con			Services			•	61809	Name
	BLOCK A	: COMPUTATION (OF BASE RA	TE FEES FOR EAG	CH SUBSCR	IBER GROUP		
		SUBSCRIBER GRO				D SUBSCRIBER GRO	UP	
COMMUNITY/ AREA	Kansas	s and Missouri		COMMUNITY/ ARE	ĒΑ		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
Tatal DOFa			0.00	T-t-LDCC-			0.00	
Total DSEs Gross Receipts First G	roup	s 1,35	0.00	Total DSEs Gross Receipts Sec	cond Group	\$	0.00	
Base Rate Fee First G		\$	0.00	Base Rate Fee Sec		\$	0.00	
COMMUNITY/ AREA	THIKD	SUBSCRIBER GRO	0	COMMUNITY/ ARE		H SUBSCRIBER GRO	0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Fou	urth Group	\$	0.00	
Base Rate Fee Third G	se Rate Fee Third Group \$ 0.00			Base Rate Fee Fourth Group \$ 0.00			0.00	
Base Rate Fee: Add th	ne hase ret	e fees for each subs	criber group o	s shown in the boyce	ahove			
Enter here and in block			on bor group a	o onown in the boxes	abovo.	\$	0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services SYSTEM ID# 61809								
						01003		
			ATE FEES FOR EACI TI			ID		
FIFTO	SUBSCRIBER GROU	0	COMMUNITY/ AREA	0	9 Computation			
T = == 1	T							
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate F	
							and Syndicate	
-						·····	Exclusivit	
							Surcharge	
<u>-</u>							for	
·							Partially	
							Distant	
							Stations	
<u></u>								
		0.00	Total DSEs			0.00		
oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00		
oup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00		
SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GROU	JP		
			COMMUNITY/ AREA			0		
DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
<u>-</u>								
 								
 								
 								
		0.00	Total DSEs			0.00		
	\$	0.00	Gross Receipts Fourt	h Group	\$	0.00		
iroup			II .					
roup						11		
	¢	0.00	Base Rate Fee Fourt	h Group	e.	0.00		
roup	\$	0.00	Base Rate Fee Fourt	h Group	\$	0.00		
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	BLOCK A: FIFTH DSE roup	BLOCK A: COMPUTATION O FIFTH SUBSCRIBER GROU DSE CALL SIGN TOUP \$ SEVENTH SUBSCRIBER GROU SEVENTH SUBSCRIBER GROU	BLOCK A: COMPUTATION OF BASE RAFIFTH SUBSCRIBER GROUP O O DSE CALL SIGN DSE O O O O O O O O O O O O O	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH FIFTH SUBSCRIBER GROUP O COMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN Total DSES Toup \$ 0.00 SEVENTH SUBSCRIBER GROUP O COMMUNITY/ AREA	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIFITH SUBSCRIBER GROUP OCOMMUNITY/ AREA DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE OCOMMUNITY/ AREA Total DSEs Toup \$ 0.00 SEVENTH SUBSCRIBER GROUP BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH COMMUNITY/ AREA COMMUNITY/ AREA	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP SIXTH SUBSCRIBER GROUP OCOMMUNITY/ AREA CALL SIGN DSE CA	BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP FIFTH SUBSCRIBER GROUP O COMMUNITY/ AREA O DSE CALL SIGN DSE CALL SIGN	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services SYSTEM ID# 61809								Name
Consolidated Col	IIIIuiiicai	ions Enterprise	Jei vices				61809	
				ATE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ AREA	NINTH	SUBSCRIBER GRO	0	COMMUNITY/ AREA	0	9		
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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	
								
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
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1	ELEVENTH	SUBSCRIBER GRO	DUP		TWELVTH	SUBSCRIBER GROU	JP	
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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	
Base Rate Fee: Add ti			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services SYSTEM ID# 61809								Name
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		SUBSCRIBER GRO		TE FEES FOR EAC			ID	
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otal DSEs			0.00	Total DSEs			0.00	
Fross Receipts First G	roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
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lana Bata Foa First C			0.00	Been Beta Fee See	and Craun		0.00	
Sase Rate Fee First G	roup	\$	0.00	Base Rate Fee Sec	ona Group	\$	0.00	
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otal DSEs			0.00	Total DSEs			0.00	
ross Receipts Third (Proup.	•	0.00	Gross Receipts Fou	th Group	•	0.00	
noos Neoelpis IIIIU (Jioup	\$	0.00	10000 Necelbio Logi	ит Отоир	\$	3.00	
sase Rate Fee Third (Group	\$	0.00	Base Rate Fee Fou	th Group	\$	0.00	
Base Rate Fee: Add th		e fees for each subs	criber group a	s shown in the boxes	above.	s		

LEGAL NAME OF OWNE Consolidated Cor			Services			\$	61809	Name
							01003	
		SUBSCRIBER GRO		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ AREA					9			
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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	
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dase Rate Fee First G	iroup	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
N	INTEENTH	SUBSCRIBER GRO	DUP		TWENTIETH	SUBSCRIBER GROU	JP	
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otal 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 ti		e fees for each subs pace L (page 7)	criber group a	II as shown in the boxes	above.	s		

DSE O.00 O.00 O.00	TE FEES FOR EACH TWENT COMMUNITY/ AREA CALL SIGN Total DSEs		BER GROUP SUBSCRIBER GROU CALL SIGN	0 DSE	Computation of Base Rate Fand Syndicated Exclusivity Surcharge for Partially Distant Stations
DUP O DSE O O O O O O O O O O O O O	TWENT COMMUNITY/ AREA CALL SIGN	Y-SECOND	SUBSCRIBER GROU	0	Computation of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
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	Total DSEs				Syndicated Exclusivity Surcharge for Partially Distant
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	Total DSEs				Surcharge for Partially Distant
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	Total DSEs				Partially Distant
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	Gross Receipts Secon	nd Group	\$	0.00	
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0.00	Base Rate Fee Secon	nd Group	\$	0.00	
OUP	TWENT	Y-FOURTH	SUBSCRIBER GROU	JP	
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DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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DSE 0.00 0.00 0.00	CALL SIGN CALL SIGN Total DSEs Gross Receipts Second Base Rate Fee Second	DSE DSE d Group	SUBSCRIBER GROU CALL SIGN * \$ \$	0.00 0.00	Computation of Base Rate Fand Syndicated Exclusivity Surcharge for Partially Distant Stations
0 DSE	TWEN COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Second Base Rate Fee Second	DSE DSE d Group	SUBSCRIBER GROU CALL SIGN * \$ \$	0.00 0.00	Computation of Base Rate Fand Syndicated Exclusivity Surcharge for Partially Distant
0.00 0.00	CALL SIGN CALL SIGN Total DSEs Gross Receipts Second Base Rate Fee Second	d Group	CALL SIGN	0.00 0.00	of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
0.00	Total DSEs Gross Receipts Second Base Rate Fee Second	d Group	\$ \$	0.00	of Base Rate F and Syndicate Exclusivit Surcharge for Partially Distant
0.00	Total DSEs Gross Receipts Second Base Rate Fee Second	d Group	\$ \$	0.00	Base Rate F and Syndicate Exclusivity Surcharge for Partially Distant
0.00	Gross Receipts Second Base Rate Fee Second	d Group	\$	0.00	and Syndicated Exclusivity Surcharge for Partially Distant
0.00	Gross Receipts Second Base Rate Fee Second	d Group	\$	0.00	Syndicated Exclusivity Surcharge for Partially Distant
0.00	Gross Receipts Second Base Rate Fee Second	d Group	\$	0.00	Exclusivity Surcharge for Partially Distant
0.00	Gross Receipts Second Base Rate Fee Second	d Group	\$	0.00	Surcharge for Partially Distant
0.00	Gross Receipts Second Base Rate Fee Second	d Group	\$	0.00	for Partially Distant
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C	0.00	Gross Receipts Fourth	Gross Receipts Fourth Group	9.00 Gross Receipts Fourth Group \$	Gross Receipts Fourth Group \$ 0.00

LEGAL NAME OF OWN Consolidated Co			Services			\$	61809	Name
Consolidated CO							01009	
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otal DSEs		Ш	0.00	Total DSEs		Ц	0.00	
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ase Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
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COMMUNITY/ AREA			0	COMMUNITY/ AREA	COMMUNITY/ AREA 0			
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
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			criber group a	as shown in the boxes	above.	¢		
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0 DSE 0.00 0.00 0.00 UP	THIRT COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Secon Base Rate Fee Secon	DSE DSE Group	SUBSCRIBER GROU	0 DSE	Computation of Base Rate Fand Syndicated Exclusivity Surcharge for Partially Distant
0.00 0.00 0.00	COMMUNITY/ AREA CALL SIGN Total DSEs Gross Receipts Secor Base Rate Fee Secor	DSE DSE	CALL SIGN	0 DSE	Computation of Base Rate Fand Syndicated Exclusivity Surcharge for Partially Distant
0.00 0.00 0.00	Total DSEs Gross Receipts Secon Base Rate Fee Secon	and Group	\$ \$	0.00	of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
0.00 0.00 0.00	Total DSEs Gross Receipts Secon Base Rate Fee Secon	and Group	\$ \$	0.00	Base Rate F and Syndicate Exclusivity Surcharge for Partially Distant
0.00 0.00	Gross Receipts Secon Base Rate Fee Secon	nd Group	\$	0.00	Syndicated Exclusivity Surcharge for Partially Distant
0.00 0.00	Gross Receipts Secon Base Rate Fee Secon	nd Group	\$	0.00	Exclusivity Surcharge for Partially Distant
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LEGAL NAME OF OWNE Consolidated Con			Sarvicas			5	61809	Name
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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intal DCFs		Ш	0.00	Total DCCs		<u> </u>	0.00	
otal DSEs				Total DSEs		-		
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	
THIF	RTY-NINTH	SUBSCRIBER GRO	UP		FORTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
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otal DSEs			0.00	Total DSEs			0.00	
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Base Rate Fee Third (-roup	\$	0.00	Base Rate Fee Four	ın Group	\$	0.00	
Base Rate Fee: Add th Enter here and in block			criber group a	as shown in the boxes	above.	\$		

LEGAL NAME OF OW Consolidated Co		E SYSTEM: ions Enterprise	Services			5	61809	Name
F		COMPUTATION C SUBSCRIBER GRC		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	9
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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	
F(ORTY-THIRD	SUBSCRIBER GRC	UP	FOI	RTY-FOURTH	SUBSCRIBER GROU	JP	
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Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Thire	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 as shown in the boxes	above.	\$		

	A: COMPUTATION (TE EEEO EOD EAO			61809	
FORTY-FIFTI		OF BASE RA	TE EEEO EOO EAO	_			
			П		BER GROUP SUBSCRIBER GROU	ID	
	1 COBCONDEN GIVE	0	COMMUNITY/ AREA		30B3CKBEK GKOC	0	9
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DOE	Computation of
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otal DSEs	-	0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
ase Rate Fee First Group	\$	0.00	Base Rate Fee Seco	and Group	\$	0.00	
FORTY-SEVENT	H SUBSCRIBER GRO	DUP	FO	RTY-EIGHTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
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LEGAL NAME OF OWN Consolidated Co			Services			S	61809	Name
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COMMUNITY/ AREA			0	COMMUNITY/ AREA	4		0	9 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 Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
		SUBSCRIBER GRO		ii ii		SUBSCRIBER GROU		
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		-	0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II as shown in the boxes	above.	\$		

	ABLE SYSTEM: ications Enterpris	e Services				61809	Name
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	KA: COMPUTATION IRD SUBSCRIBER GR		TT .		SUBSCRIBER GROUP	IP	
COMMUNITY/ AREA					0	9	
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN DS	E CALL SIGN	DOE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate F
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						•••••	Surcharge
							for
							Partially
							Distant
							Stations
otal DSEs		0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
sase Rate Fee First Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FIFTY-FI	FTH SUBSCRIBER G	ROUP		FIFTY-SIXTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
					-		
		0.00	Total DSEs			0.00	
otal DSEs			11				
otal DSEs			0 5			0.00	
otal DSEs Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	

LEGAL NAME OF OWN Consolidated Co			Services			\$	61809	Name
							01003	
EIET		SUBSCRIBER GRO		ATE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	ID.	
COMMUNITY/ AREA	-SEVENTII	30B3CKBEK GKC	0	COMMUNITY/ AREA		30B3CKIBEK GKO	0	9
CALL SIGN	Dec	I CALL SIGN	DOE	CALL SIGN	Dec	I CALL SIGN	DOE	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of Base Rate F
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								Exclusivity
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								for
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								Stations
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		Ш	0.00			Ц	0.00	
otal DSEs	_		0.00	Total DSEs			0.00	
Gross Receipts First (∍roup	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
FI	FTY-NINTH	SUBSCRIBER GRO)UP		SIXTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		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	rth Group	\$	0.00	
							$\overline{}$	
Base Rate Fee Third	Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add t	he base rat	e fees for each subs	criber group a	II as shown in the boxes	above.			
Base Rate Fee: Add t Enter here and in bloc			criber group a	s snown in the boxes	apove.	\$		

	CABLE SYSTEM: nications Enterpri	se Services			:	61809	Name
DI CC			TE EEEO EOD E 1	NI OUBOOS	DED ODOLID	0.000	
	K A: COMPUTATIO				SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA			0	9
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
CALL SIGN DS	E CALL SIGN	DOE	CALL SIGN	DSE	CALL SIGN	DOE	Base Rate F
							and
					 		Syndicate
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						•••••	Surcharge
							for
							Partially
							Distant
							Stations
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	Base Rate Fee Sec	ond Group	\$	0.00	
SIXTY-TI	HIRD SUBSCRIBER G	ROUP	SIZ	KTY-FOURTH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA		0	COMMUNITY/ AREA	A		0	
CALL SIGN DS	E CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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		0.00	Total DSEs			0.00	
otal DSEs		1, 1111				0.00	
		0.00	II _				
otal DSEs Gross Receipts Third Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	

LEGAL NAME OF OWNE Consolidated Con			Sarvicas		Name			
							61809	
				TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	ID	
COMMUNITY/ AREA	XIY-FIFIH	SUBSCRIBER GRO	0	COMMUNITY/ AREA	0	9		
								Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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		Ш	0.00	T		Į I	0.00	
otal DSEs			0.00	Total DSEs			0.00	
Bross 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	
SIXTY-	SEVENTH	SUBSCRIBER GRO	UP	SI				
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
.			2.55					
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	tn Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			criber group a	s shown in the boxes	above.	\$		

	GAL NAME OF OWNER OF CABLE SYSTEM: onsolidated Communications Enterprise Services 61809									
		COMPUTATION C		TE FEES FOR EAC	ID					
COMMUNITY/ AREA		OUDGENIBEN GNE	0	COMMUNITY/ AREA		SUBSCRIBER GROU	0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
								Base Rate Fee and		
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								for		
								Partially Distant		
								Stations		
Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00			
Base Rate Fee First		\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00			
		SUBSCRIBER GRO	0 0	ii ii		SUBSCRIBER GROU	JP 0			
COMMUNITY/ AREA			U	COMMUNITY/ ARE/	*					
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			
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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	s shown in the boxes	apove.	\$				

EGAL NAME OF OWNER Consolidated Com			Services		Name			
							61809	
		SUBSCRIBER GRO		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	ID	
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CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DOE	Computation of
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Base Rate F
								and
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otal DSEs			0.00	Total DSEs		-	0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
ase Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
SEVEN	ITY-FIFTH	SUBSCRIBER GRO	UP	SEV				
OMMUNITY/ AREA			0	COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Dana Bata Fan William			0.00	Base Bata E . 5	4h O-		0.65	
Base Rate Fee Third G	ιουρ	\$	0.00	Base Rate Fee Four	ui Group	\$	0.00	
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onoonaatea ooniint		SYSTEM: ons Enterprise S	ervices		YSTEM ID# 61809	Name		
							01009	
				TE FEES FOR EACH	<u> </u>			
SEVENTY-SEV	/ENTH	SUBSCRIBER GROU	0	SEVENT COMMUNITY/ AREA	0	9		
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CALL SIGN D	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
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-t-LDCE-	ļ		0.00	T-4-1 DOE			0.00	
otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group)	\$	0.00	Gross Receipts Second	d Group	\$	0.00	
ase Rate Fee First Group)	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
SEVENTY-I	NINTH	SUBSCRIBER GROU	IP	ı	Р			
SEVENTY-NINTH SUBSCRIBER GROUP MMUNITY/ AREA 0								
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
	DSE	CALL SIGN	DSE	COMMUNITY/ AREA CALL SIGN	DSE	CALL SIGN		
	DSE	CALL SIGN					0	
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EGAL NAME OF OWI		E SYSTEM: tions Enterprise	Services		Name				
				TE EEE		DED 05 01 15	61809		
Fl		SUBSCRIBER GRO		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	IP		
COMMUNITY/ AREA		CODOCHIDEN CINC	0	ii —	COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of	
CALL GIGIN	DOL	OALL GIGIT	DOL	OALL SIGIN	DOL	CALL GIGIT	DOL	Base Rate F	
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		<u> </u>							
otal DSEs			0.00	Total DSEs			0.00		
ross Receipts First	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
ase Rate Fee First	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
EIC	GHTY-THIRD	SUBSCRIBER GRO	DUP	EIGH					
OMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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otal DSEs			0.00	Total DSEs			0.00		
ross Receipts Third	d Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Raco Dato Eco Thi-	d Group		0.00	Base Rate Fee Four	th Group		0.00		
Base Rate Fee Third	a Oroup	\$	0.00	Dase Nate Fee Four	ат Огоир	\$	0.00		
ase Rate Fee: Add			criber group a	as shown in the boxes	above.	\$			
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EIGHTY-FIFTH SU	OMPUTATION OF BA						9		
EIGHTY-FIFTH SU	JBSCRIBER GROUP	0	EIGH						
COMMUNITY/ AREA				TIT-SIXIH	SUBSURIBER GROUP		_		
CALL SIGN DSE	CALL SIGN	DSE	1		COMMUNITY/ AREA 0				
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otal DSEs	0	0.00	Total DSEs	!!		0.00			
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Gross Receipts First Group \$	U	0.00	Gross Receipts Second	i Group	\$	0.00			
sase Rate Fee First Group \$	0	0.00	Base Rate Fee Second	l Group	\$	0.00			
EIGHTY-SEVENTH SU	JBSCRIBER GROUP		EIGHT	Y-EIGHTH	SUBSCRIBER GROUP				
COMMUNITY/ AREA		0	COMMUNITY/ AREA						
CALL SIGN DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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otal DSEs	0	0.00	Total DSEs			0.00			
Gross Receipts Third Group \$	0	0.00	Gross Receipts Fourth	Group	\$	0.00			
									
Base Rate Fee Third Group \$	0	0.00	Base Rate Fee Fourth	Group	\$	0.00			

LEGAL NAME OF OWNE			Services		Name				
							61809		
				TE FEES FOR EAC	ID				
COMMUNITY/ AREA	11 Y-NIN I H	SUBSCRIBER GRO	0	COMMUNITY/ AREA	NINTIETH SUBSCRIBER GROUP COMMUNITY/ AREA 0				
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otal DSEs		Ш	0.00	Total DSEs		11	0.00		
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Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00		
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00		
NIN	ETY-FIRST	SUBSCRIBER GRO	UP	NINE					
COMMUNITY/ AREA			0	COMMUNITY/ AREA					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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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		
		e fees for each subs pace L (page 7)	criber group a	as shown in the boxes	above.	s			

	nunicati	: SYSTEM: ions Enterprise S	ervices		61809	Name		
				TE EEEO EO EO EO	OLIBOAT:	DED 000::5	01009	
		COMPUTATION OF SUBSCRIBER GROU		ATE FEES FOR EACH		BER GROUP SUBSCRIBER GROU	IP.	
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	DSE	CALL SIGN	DOE	Base Rate F
								and
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otal DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Grou	ap	\$	0.00	Gross Receipts Secon	d Group	\$	0.00	
Base Rate Fee First Grou	лb	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
NINET	Y-FIFTH	SUBSCRIBER GROU	JP	NIN				
NINETY-FIFTH SUBSCRIBER GROUP MMUNITY/ AREA 0			H	LIT-OIXIII	SUBSCRIBER GROU	7		
COMMUNITY/ AREA				COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN		1	DSE	CALL SIGN		
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			0	COMMUNITY/ AREA			0	
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CALL SIGN			0	COMMUNITY/ AREA			0	
			0	COMMUNITY/ AREA			0	
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CALL SIGN			0	COMMUNITY/ AREA			0	
	DSE		DSE	CALL SIGN	DSE		DSE	

R GROUP 0 N DSE 0 0 0 0 0 0 0 0 0 0 0 0 0 0	TOTAL DSES Gross Receipts Second Group SINNETY-EIGHTH SUBSCRIBER GROUP NINETY-EIGHTH SUBSCRIBER GROUP CALL SIGN DSE CALL SIGN DSE CALL SIGN CALL SIGN Total DSEs Gross Receipts Second Group \$	0 DSE	Q Computatio of Base Rate Fo and Syndicated Exclusivity Surcharge for Partially Distant Stations
R GROUP 0 N DSE 0 0 0 0 0 0 0 0 0 0 0 0 0 0	NINETY-EIGHTH SUBSCRIBER GR COMMUNITY/ AREA CALL SIGN DSE CALL SIGN CALL SIGN Total DSEs Gross Receipts Second Group \$	0 DSE 0.00 0.00	of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
0.00 0.00	CALL SIGN DSE CALL SIGN CALL SIGN DSE CALL SIGN Total DSEs Gross Receipts Second Group \$	0 DSE 0.00 0.00	of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
0.00	Total DSEs Gross Receipts Second Group	0.00 0.00	of Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
0.00	Total DSEs Gross Receipts Second Group	0.00	Base Rate F and Syndicated Exclusivity Surcharge for Partially Distant
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0.00	Gross Receipts Second Group \$	0.00	Syndicated Exclusivity Surcharge for Partially Distant
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0.00	Gross Receipts Second Group \$	0.00	for Partially Distant
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	Base Rate Fee Second Group \$	0.00	
P CBOLID		ĭ	
R GROUP	ONE HUNDREDTH SUBSCRIBER GF	ROUP	
0	COMMUNITY/ AREA	0	
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0.00	Total DSEs	0.00	
0.00	Gross Receipts Fourth Group \$	0.00	
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	GAL NAME OF OWNER OF CABLE SYSTEM: onsolidated Communications Enterprise Services 61809									
				TE FEES FOR EAC						
COMMUNITY/ AREA		SUBSCRIBER GRO	0	COMMUNITY/ AREA		SUBSCRIBER GROU)P 0	9		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of		
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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			
		SUBSCRIBER GRO				SUBSCRIBER GROU	JP 0			
COMMUNITY/ AREA			0	COMMUNITY/ AREA						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE			
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Total DSEs			0.00	Total DSEs			0.00			
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00			
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Base Rate Fee Third	I Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00			
Base Rate Fee: Add Enter here and in blo			criber group a	s shown in the boxes a	above.	\$				

LEGAL NAME OF OWN Consolidated Co			Sarvisas		Name			
Consolidated Co	Illiumcai	ions Enterprise	Services				61809	
01511111				TE FEES FOR EAC	ID.			
ONE HUND COMMUNITY/ AREA	KED FIFTH	SUBSCRIBER GRO	0 0	ONE HUN COMMUNITY/ AREA	UP 0	9		
SOMMONT IT AIREA				COMMONT IT AREA	`			Computation
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 (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	SEVENTH	SUBSCRIBER GRO	DUP	ONE HUND				
COMMUNITY/ AREA			0	COMMUNITY/ AREA				
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	
				Ш				
			criber group a	as shown in the boxes	above.			
inter here and in bloc	k 3, line 1, s	pace L (page 7)				\$		

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services 61809								
				TE FEES FOR EAC	H SUBSCRI	BER GROUP			
		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 Fee	
								and	
			····					Syndicated Exclusivity	
								Surcharge	
								for	
								Partially	
						<u> </u>		Distant Stations	
	•••••					 		Otations	
						<u> </u>			
Total DSEs		Ш	0.00	Total DSEs		Į. <mark>l</mark>	0.00		
							_		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
ONE HUNDRED	ELEVENTH	SUBSCRIBER GRO	UP	ONE HUNDRE	ED TWELVTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	A		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			····			 			
		-				-			
			····						
			····						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	d Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00		
Base Rate Fee Third	d Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			criber group a	s shown in the boxes	above.	\$			

	EGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services 61809								
ONE HUNDRED T		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		BER GROUP SUBSCRIBER GROU	JP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
								Base Rate Fee and	
								Syndicated Exclusivity	
								Surcharge	
								for Partially	
								Distant	
								Stations	
Total DSEs	•		0.00	Total DSEs	•		0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00		
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00		
ONE HUNDRED	FIFTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRE	SIXTEENTH	SUBSCRIBER GROU	JP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA	Α		0		
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00		
Base Rate Fee Third	l 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.	\$			

LEGAL NAME OF OWI			Services			\$	61809	Name
ONE HUNDRED SE				ONE HUNDRED E		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
			····					
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	NINTEENTH	SUBSCRIBER GRO	UP	ONE HUNDRED	TWENTIETH	SUBSCRIBER GROU	JP	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	0			
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			····					
			····					
			···					
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	rth Group	\$	0.00	
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	rth Group	\$	0.00	
Base Rate Fee: Add Enter here and in blo			criber group a	II	above.	\$		

LEGAL NAME OF OWNE			Comilees			5	SYSTEM ID#	Name
Consolidated Cor	mnunicat	ions Enterprise	Sei vices				61809	
				TE FEES FOR EAC				
	ENTY-FIRST	SUBSCRIBER GRO		ii		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
						<u> </u>		Surcharge
								for Partially
						 		Distant
		<u> </u>	····			-		Stations
		Ш				Ц	2.22	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First G	Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
			•				•	
	ENTY-THIRD	SUBSCRIBER GROUP		ii e		SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						<u> </u>		
						 		
		H	····		•••••	 	•••••	
		<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	
				II				
Base Rate Fee: Add t Enter here and in bloc			criber group a	s shown in the boxes	above.	\$		
and hore and in bide	0, 1, 5	Pade L (page 1)				*		

LEGAL NAME OF OWI		SYSTEM: ions Enterprise S	Services			\$	61809	Name
ONE WAY				ATE FEES FOR EAC				
ONE HUNDRED TO		SUBSCRIBER GROUP	0	ONE HUNDRED T		SUBSCRIBER GROUP	0	9
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation of
								Base Rate Fee
								and Syndicated
								Exclusivity
								Surcharge for
								Partially
								Distant
								Stations
			<u></u>					
Total DSEs	•	-	0.00	Total DSEs			0.00	
Gross Receipts First	Group	\$	0.00	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
ONE HUNDRED TWEN	ITY-SEVENTH	SUBSCRIBER GROUP	1	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	
						 		
			0.00				0.00	
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			riber group a	II as shown in the boxes	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services 61809								
	BLOCK A:	COMPUTATION O	F BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP			
ONE HUNDRED TV	VENTY-NINTH	SUBSCRIBER GROUP	1	ONE HUNDR	ED THIRTIETH	SUBSCRIBER GROUP		^	
COMMUNITY/ AREA			0	COMMUNITY/ AREA	·····		0	9 Computation	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of	
		 						Base Rate Fee	
			<u></u>			<u> </u>		and	
			<u></u>			<u> </u>		Syndicated Exclusivity	
								Surcharge	
								for	
								Partially	
								Distant	
								Stations	
						 			
			<u></u>						
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts First	Group	\$	0.00	Gross Receipts Seco	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					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
			<u></u>			<u> </u>			
			<u></u>			<u> </u>			
						-			
						<u> </u>			
						 			
						-			
Total DSEs			0.00	Total DSEs		_	0.00		
Gross Receipts Third	l Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00		
Base Rate Fee Third	l Group	\$	0.00	Base Rate Fee Four	th Group	\$	0.00		
Base Rate Fee: Add Enter here and in blo			riber group a	II as shown in the boxes	above.	\$			

LEGAL NAME OF OWNE			Sorvioos			S	SYSTEM ID#	Name
Consolidated Com	municat	ions Enterprise S	Del VICES				61809	
				TE FEES FOR EACH				
	RTY-THIRD	SUBSCRIBER GROUP		ii —		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
		H						and
								Syndicated
								Exclusivity
								Surcharge for
					····			Partially
								Distant
		-						Stations
		<u> </u>						
	<u> </u>							
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED TH	IRTY-FIFTH	SUBSCRIBER GROUP	ı	ONE HUNDRED T	HIRTY-SIXTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-						
		 	<u></u>		····			
		-						
	····	H			····			
			<u></u>					
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.	\$		

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE	DSE	Gomputation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations			
COMMUNITY/ AREA COMMUNITY/ AREA	DSE	Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant			
	DSE	Computation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant			
CALL SIGN DSE DSE DSE DSE DSE DSE DSE DS		of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant			
		and Syndicated Exclusivity Surcharge for Partially Distant			
		Syndicated Exclusivity Surcharge for Partially Distant			
		Exclusivity Surcharge for Partially Distant			
		Surcharge for Partially Distant			
		for Partially Distant			
		Partially Distant			
		Stations			
	Į.				
Total DSEs Total DSEs	0.00				
Gross Receipts First Group \$ 0.00 Gross Receipts Second Group \$	0.00				
Base Rate Fee First Group \$ 0.00 Base Rate Fee Second Group \$	0.00				
ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FORTIETH SUBSCRIBER GROUP)				
COMMUNITY/ AREA COMMUNITY/ AREA	COMMUNITY/ AREA 0				
CALL SIGN DSE CALL SIGN DSE CALL SIGN	DSE				
Total DSEs Total DSEs	0.00				
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$	0.00				
Base Rate Fee Third Group \$ 0.00 Base Rate Fee Fourth Group \$	0.00				
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) \$					

	LEGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services 61809							
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	ORTY-FIRST	SUBSCRIBER GROUP				SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
						-		Syndicated
						H		Exclusivity Surcharge
		+				 		for
								Partially
		-						Distant
								Stations
						<u> </u>		
					····	<u> </u>		
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First 0	Group	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	nd Group	\$	0.00	
ONE HUNDRED FO	ORTY-THIRD	SUBSCRIBER GROUP		ONE HUNDRED FO	RTY-FOURTH	SUBSCRIBER GROUP		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
						-		
		+				 		
						<u> </u>		
						 		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third	Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Page Bata For This I	Crous		0.00	Page Pete Fee Fee	th Crown		0.00	
Base Rate Fee Third	G10up	\$	0.00	Base Rate Fee Four	и стоир	\$	0.00	
Base Rate Fee: Add t Enter here and in bloc			iber group a	as shown in the boxes a	above.	\$		

	EGAL NAME OF OWNER OF CABLE SYSTEM: Consolidated Communications Enterprise Services 61809							
	BLOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EAC	H SUBSCRI	BER GROUP		
	ORTY-FIFTH	SUBSCRIBER GROUP		ONE HUNDRED	FORTY-SIXTH	SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
						<u> </u>		and
								Syndicated Exclusivity
					•••••			Surcharge
			• • • • • • • • • • • • • • • • • • • •					for
								Partially
								Distant
								Stations
						<u> </u>		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First (Group	\$	0.00	Gross Receipts Seco	ond Group	\$	0.00	
Base Rate Fee First (Group	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FORT	Y-SEVENTH	SUBSCRIBER GROUP		ONE HUNDRED FO	ORTY-EIGHTH	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			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	
Book Bots Free A LL	ha hace as t	for for a should	ibor a	an about in the leave	ahaya			
Enter here and in bloc			ivei group a	as shown in the boxes a	ಡು∪∨ಆ.	\$		

LEGAL NAME OF OWNER Consolidated Com			ervices			S	YSTEM ID# 61809	Name
Е	BLOCK A:	COMPUTATION OF	BASE RA	ATE FEES FOR EAC	H SUBSCRI	BER GROUP		
ONE HUNDRED FOR	TY-NINTH	SUBSCRIBER GROU	Р	ONE HUNDR	ED FIFTIETH	SUBSCRIBER GROU	Р	0
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fee
								and
								Syndicated
								Exclusivity
								Surcharge
								for
								Partially
								Distant Stations
								Stations
						<u> </u>		
Total DSEs	-		0.00	Total DSEs			0.00	
Gross Receipts First Gr	oup	\$	0.00	Gross Receipts Seco	nd Group	\$	0.00	
Base Rate Fee First Gr	oup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
ONE HUNDRED FIF	TY-FIRST	SUBSCRIBER GROU	P	ONE HUNDRED FIF	TY-SECOND	SUBSCRIBER GROU	Р	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third G	roup	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
,	•							
Base Rate Fee Third G	roup	\$	0.00	Base Rate Fee Four	th Group	\$	0.00	
Base Rate Fee: Add the Enter here and in block			iber group a	as shown in the boxes a	above.	\$		

EGAL NAME OF OWNER			arvicas			S	61809	Name
Consolidated Com	Illullicat	ions Enterprise 3	ervices				61809	
				TE FEES FOR EACH			ID.	
	IY-THIRD	SUBSCRIBER GROU		ii	IY-FOURTH	SUBSCRIBER GROU		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate Fe
								and
								Syndicated
								Exclusivity
								Surcharge
		<u> </u>						for Partially
								Distant
		+						Stations
						_		
			0.00				0.00	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Gro	oup	\$	0.00	Gross Receipts Secon	nd Group	\$	0.00	
Base Rate Fee First Gro	oup	\$	0.00	Base Rate Fee Secon	nd Group	\$	0.00	
ONE LUNDRED EIE	T) / E1ET! !		, ,	ONE LUNDRED S		•		
	IY-FIFIH	SUBSCRIBER GROU		11	·IFTY-SIXTH	SUBSCRIBER GROU		
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		+						
								
								
I DOE			0.00	T-4-1 DCE-			0.00	
Total DSEs								
Gross Receipts Third G	oup	\$	0.00	Gross Receipts Fourtl	h Group	\$	0.00	
3ase Rate Fee Third Gr	oup	\$	0.00	Base Rate Fee Fourth	h Group	\$	0.00	
Receipts Third Gi	oup	\$ e fees for each subscr		Total DSEs Gross Receipts Fourth Base Rate Fee Fourth as shown in the boxes a	h Group		0.00	

EGAL NAME OF OWNE			Comilees			5	SYSTEM ID#	Name
Consolidated Con	iiiiuiiicat	ions Enterprise	Sei vices				61809	
				TE FEES FOR EAC				
	Y-SEVENTH	SUBSCRIBER GROU		ii –		SUBSCRIBER GROUP		9
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate F
								and
								Syndicated
								Exclusivity
						<u> </u>		Surcharge for
						 		Partially
						-		Distant
								Stations
	<u>.</u>							
	····							
	····	<u> </u>				 		
Total DSEs	•	'	0.00	Total DSEs	•	'	0.00	
	·ra	•	0.00		and Croun	•		
Gross Receipts First G	iroup	\$	0.00	Gross Receipts Seco	ona Group	\$	0.00	
Base Rate Fee First G	iroup	\$	0.00	Base Rate Fee Seco	ond Group	\$	0.00	
							,	
	IFTY-NINTH	SUBSCRIBER GROU		11		SUBSCRIBER GROUP	_	
COMMUNITY/ AREA			0	COMMUNITY/ AREA			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
	····	<u> </u>	····			<u> </u>		
						-		
						<u> </u>		
	····				•••••	-		
Total DSEs			0.00	Total DSEs			0.00	
Total DSEs				Total DSEs				
Gross Receipts Third (Group	\$	0.00	Gross Receipts Four	th Group	\$	0.00	
Paga Bata Fac This I (Crou.∽		0.00	Page Pate Fee F	th Crave		0.00	
Base Rate Fee Third (∍roup	\$	0.00	Base Rate Fee Four	иі Group	\$	0.00	
				Ш				
Base Rate Fee: Add th	ne base rat	e fees for each subs	criber group a	s shown in the boxes	above.			
Enter here and in block			3 2			\$		

LEGAL NAME OF OWNE Consolidated Con			Services			•	61809	Name
		COMPUTATION C SUBSCRIBER GRO		TE FEES FOR EAC		IBER GROUP SUBSCRIBER GRO	UP	
COMMUNITY/ AREA		and Missouri		COMMUNITY/ AREA		- COBOOTIBET OF O	0	9 Computation
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	Computation
								Base Rate Fee
								Syndicated
								Exclusivity Surcharge
								for Partially
								Distant
								Stations
Total DSEs		Н	0.00	Total DSEs		· L	0.00	
Gross Receipts First G	roup	ş 1,35	2,436.40	Gross Receipts Sec	ond Group	\$	0.00	
Base Rate Fee First G	-	\$	0.00	Base Rate Fee Sec	-	\$	0.00	
COMMUNITY/ AREA	THIRD	SUBSCRIBER GRO	<u>UP</u> 0	COMMUNITY/ ARE		SUBSCRIBER GRO	UP 0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third C	Group	\$	0.00	Gross Receipts Fou	rth Group	\$	0.00	
Base Rate Fee Third G	Group	\$	0.00	Base Rate Fee Fou	rth Group	\$	0.00	
				II				
Base Rate Fee: Add th Enter here and in block			criber group a	s shown in the boxes	above.	\$	0.00	

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Name	SYSTEM: SYSTEM ID# ons Enterprise Services 61809							
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9		SUBSCRIBER GROUP	ENTY-SIXTH	H		SUBSCRIBER GROUP	ENTY-FIFTH	
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LEGAL NAME OF OWNE Consolidated Con			SYSTEM: SYSTEM ID# ns Enterprise Services 61809						
	BLOCK A:	COMPUTATION C	F BASE RA	TE FEES FOR EAC					
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ONE HUNDRED THIS	RTY-NINTH	SUBSCRIBER GRO	UP	ONE HUNDRE	D FORTIETH	SUBSCRIBER GRO	UP		
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FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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 Second Group 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** Third Group SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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. ONE HUNDRED FIFTH SUBSCRIBER GROUP ONE HUNDRED SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group ONE HUNDRED SEVENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE **SURCHARGE** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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. ONE HUNDRED TENTH SUBSCRIBER GROUP ONE HUNDRED NINTH 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 ONE HUNDRED ELEVENTH SUBSCRIBER GROUP ONE HUNDRED TWELVTH 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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	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA3E. PAGE 20.			
Name	Consolidated Communications Enterprise Services	SYSTEM ID# 61809			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP				
9	If your cable system is located within a top 100 television market and Syndicated Exclusivity Surcharge. Indicate which major television may by section 76.5 of FCC rules in effect on June 24, 1981:	the station is not exempt in Part 7, you must also compute a			
Computation of	☐ First 50 major television market	☐ Second 50 major television market			
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as 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. 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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show				
	ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP	ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP			
	Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs	Line 1: Enter the VHF DSEs			
	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE First Group	Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE Second Group			
	ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs	Line 1: Enter the VHF DSEs			
	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation SYNDICATED EXCLUSIVITY SURCHARGE	Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation			
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page				

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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. ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTEENTH 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 ONE HUNDRED NINTEENTH SUBSCRIBER GROUP ONE HUNDRED TWENTIETH 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

		SA3E. PAGE 20.			
Name	Consolidated Communications Enterprise Services	61809			
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP				
9 Computation	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:	a			
of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially	□ First 50 major television market □ Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified at 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. 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 Stations	schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show				
	ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP ONE HUNDRED TWENTY-SECOND SUBSCRIBE ONE HUNDRED TWENTY-SECOND SUBSCRIBE	R 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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation	-			
	ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP ONE HUNDRED TWENTY-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 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation				
	SYNDICATED EXCLUSIVITY SURCHARGE Third Group				
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)				

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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. ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE **SURCHARGE** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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. ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP ONE HUNDRED THIRTIETH 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 First Group ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP ONE HUNDRED THIRTY-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** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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. ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP ONE HUNDRED THIRTY-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 First Group ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP ONE HUNDRED THIRTY-FIFTH 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

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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. ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs Line 2: Enter the Exempt DSEs Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FORTIETH 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

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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. ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FORTY-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 First Group ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP ONE HUNDRED FORTY-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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	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#			
Name	Consolidated Communications Enterprise Services				
	BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP				
Gomputation of Base Rate Fee and Syndicated Exclusivity	If your cable system is located within a top 100 television market and the standard Syndicated Exclusivity Surcharge. Indicate which major television market as by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Sinstructions: Step 1: In line 1, give the total DSEs by subscriber group for commercial withis schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the	ny portion of your cable system is located in as defined econd 50 major television market /HF Grade B contour stations listed in block A, part 9 of			
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. 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 schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show				
Partially Distant Stations					
	ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP	ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP			
	Line 1: Enter the VHF DSEs	ine 1: Enter the VHF DSEs			
		ine 2: Enter the Exempt DSEs			
		ine 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation			
	SYNDICATED EXCLUSIVITY	SYNDICATED EXCLUSIVITY SURCHARGE Second Group			
	ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP				
	Line 1: Enter the VHF DSEs Line 1: Enter the VHF DSEs				
	Line 2: Enter the Exempt DSEs	ine 2: Enter the Exempt DSEs			
	and enter here. This is the total number of DSEs for this subscriber group	ine 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber			
	subject to the surcharge computation	subject to the surcharge computation			
		SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group			
	Tima Group	1 out it Group			
	SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown in the boxes above. Enter here and in block 4, line 2 of space L (page 7)				

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name **Consolidated Communications Enterprise Services** 61809 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. ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP ONE HUNDRED FIFTIETH 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 First Group ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP ONE HUNDRED FIFTY-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** SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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FORM SA3E. PAGE 20.

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C	Cal Wol	ble rksheet	Total amount of remittance	Number of SAs rec'd		ı l ı	Initials	
			Date of remittance	_ □Check	□EFT	□FILING	G FEES	
Cable ID #						Amount	Initials	
Examined by		Reviewed by	Date examination completed	Allocatio	on number			
Space A Accounting Period								
	□ January 1 - June 30, 2017 □ July 1 - December 31, 2017							
	□Letter sent □Information received							
	□Accepted □Phone call/Date/Contact							
Space B Owner								
	Letter	sent	Γ	☐Information red	ceived			
	□Accep	oted	С	Phone call/Date	e/Contact			
Space D Area Served								
	Letter sent		Γ	☐Information red	ceived			
	□Accepted			☐ Phone call/Date/Contact				
Space E Secondary Transission								
Service Subscribers: and Rates	□Letter sent □Information received							
	□Accepted □Phone call/Date/Contact							
Space G Primary Transmitters:								
Television	□Letter sent □Information received							
	□Accepted □Phone call/Date/Contact							
Space H Primary Transmitters:								
Radio	□Accon	atod	Γ	□ Phone call/Dat	o/Contact			

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