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

Return completed workbook by email to:

# 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						
02/14/2022	\$						
02/14/2022	ALLOCATION NUMBER						

## 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	2021/2									
Period										
B Owner	Instructions:         Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.         List any other name or names under which the owner conducts the business of the cable system.         If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.         Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.									
	LEGAL NAME OF	OWNER/MAILING ADDRESS OF CA	ABLE SYSTEM							
	SERVICE E	LECTRIC CABLEVISION, I	NC.							
						6553	320212			
						6553	2021/2			
							2021/2			
	4949 LIBEF	RTY LANE, SUITE 400								
	ALLENTOV	VN, PA 18106								
С		In line 1, give any business or trac pear in space B. In line 2, give the								
System		OF CABLE SYSTEM:								
	<sup>1</sup> SUNBURY,									
	MAILING ADDRE	SS OF CABLE SYSTEM:								
	2 (Number, street, rura	al route, apartment, or suite number)								
	(City, town, state, zip	o code)								
D	•	complete space D instructions, se	o nago 1h. Idontifu	only the fret com	nunity convod bolow and re					
D Area	with all communitie	• •	se page 15. Identity		numity served below and re	enst on page	5 10			
Served	CITY OR TOWN			STATE						
First	Sunbury			РА						
Community	Below is a samp	le for reporting communities if you	u report multiple ch	annel line-ups in S	pace G.					
	CITY OR TOWN	N (SAMPLE)		STATE	CH LINE UP		GRP#			
Sample	Alda			MD	A		1			
	Alliance			MD	В		2			
	Gering			MD	В		3			
Privacy Act Notice	Section 111 of title 17	of the United States Code authorizes the C	Convright Offce to collec	t the personally identify	ing information (PII) requested or	this				
-		ccount. PII is any personal information that			• • • • •					
• •		to the routine use of it to establish and ma	•		• •					
		effect of not providing the PII requested is and it may affect the legal suffciency of the	• • • •	• •	•	ne				
sompleted record t	statements of account,		o miy, a doterriniation t	hat would be made by	a odart of law.					

FORM SA3E. PAGE 1b.				1					
LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#						
SERVICE ELECTRIC CABLEVISION, INC.			6553						
<b>Instructions:</b> 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.									
<b>Note:</b> Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city or town.									
-	i a ana ahannal lina un	for all) than aithe	raccolato						
If all communities receive the same complement of television broadcast stations all communities with the channel line-up "A" in the appropriate column below or on a partially distant or partially permitted basis in the DSE Schedule, associate designated by a number (based on your reporting from Part 9).	leave the column blank. If each relevant community	f you report any st / with a subscriber	ations group,						
When reporting the carriage of television broadcast stations on a community-by channel line-up designated by an alpha-letter(s) (based on your Space G report (based on your reporting from Part 9 of the DSE Schedule) in the appropriate carries of the DSE Schedule of the appropriate carries of the DSE Schedule of the appropriate carries of the DSE Schedule of the appropriate carries of the term of the schedule of the term of	ting) and a subscriber grou								
CITY OR TOWN	STATE	CH LINE UP	SUB GRP#	]					
Sunbury	PA	AA	1	First					
Beaver Twp.	PA	AA	2	Community					
Beavertown Borough	PA	AA	2						
Bloomsburg	PA	AC	4						
Buffalo Twp.	PA	AD	9						
Catawissa Borough	PA	AC	4	See instructions for					
Catawissa Twp.	PA	AC	4	additional information					
Centre Twp.	PA	AA	1	on alphabetization.					
Cleveland Twp.	PA	AC	3						
Coal Twp.	PA	AB	7						
Conyngham	PA	AB	7						
Cooper Twp.	PA	AD	9	Add rows as necessary					
Danville Borough	PA	AD	9						
Delaware Twp.	PA	AD AD	9						
Derry Twp.	PA	AD AD	9						
East Buffalo Twp.	PA PA	AD AD							
			9						
E. Cameron Twp.	PA	AB	7						
E. Chillisquaque Twp.	PA	AD	9						
Franklin Twp. (Columbia)	PA	AE	5						
Franklin Twp. (Snyder)	PA	AA	1						
Freeburg Borough	PA	AA	1						
Gregg Twp.	PA	AD	10						
Hemlock Twp.	PA	AC	4						
Herndon	PA	AA	1						
Jackson Twp. (Northumberland)	PA	AA	1						
Jackson Twp. (Snyder)	PA	AA	1						
Jordan Twp.	PA	AA	1						
Kelly Twp.	PA	AD	9						
Kulpmont Borough	PA	AB	7						
Lewis Twp.	PA	AD	9						
Lewisburg Borough	PA	AD	9						
Liberty Twp.	PA	AD	9						
Limestone Twp. (Union Co.)	PA	AA	1						
Limestone Twp. (Montour Co.)	PA	AD	9						
Little Mahanoy Twp.	PA	AA	1						
Locust Twp.	PA	AC	3						
Lower Augusta	PA	AB	7						
		AA	4	1					
Lower Mahanoy Twp.	PA	AA	1						
Lower Mahanoy Twp. Mahoning Twp.	PA PA	AA	9						

Marian Heights Borough	PA	AB	7
IcEwensville Borough	PA	AD	10
liddleburg	PA	AA	1
liddlecreek Twp.	PA	AA	1
lilton Borough	PA	AD	9
Ionroe Twp.	PA	AA	1
Iontour Twp.	PA	AF	6
At. Carmel Borough	PA	AB	7
	PA PA		7 7
At. Carmel Twp.		AB	
/t. Pleasant Twp.	PA	AC	4
I. Centre Twp.	PA	AC	4
lew Berlin Borough	PA	AA	1
Iorthumberland Borough	PA	AA	1
Drange Twp.	PA	AC	4
Penn Twp.	PA	AA	1
Point Twp.	PA	AG	8
Ralpho Twp.	PA	AB	7
			<i>י</i> 9
Riverside Borough	PA	AD	9 3
Roaring Creek Twp.	PA	AC	3
Rockfeller Twp.	PA	AA	1
6. Centre Twp.	PA	AC	4
Scott Twp.	PA	AC	4
Selinsgrove Borough	PA	AA	1
Shamokin City	PA	AB	7
Shamokin Dam Borough	PA	AA	· 1
			I 7
Shamokin Twp.	PA	AB	7
Snydertown Borough	PA	AB	7
Spring	PA	AA	2
Furbot Twp.	PA	AD	9
Furbotville Borough	PA	AD	10
Jpper Augusta Twp.	PA	AA	1
Jpper Mahanoy Twp.	PA	AA	- 1
Jnion Twp.	PA	AG	8
/alley Twp.	PA	AD	9
V. Cameron Twp.	PA	AB	7
V. Chillisquaque Twp.	PA	AD	9
Vashington Twp. (Northumberland)	PA	AA	1
Vashington Twp. (Snyder)	PA	AA	1
Vashingtonville Borough	PA	AD	10
Vatsontown Borough	PA	AD	10
Vest Hemlock Twp.	PA	AD	9
Vhite Deer Twp.	PA	AD	9
Zerbe Twp.	PA	AA	1
Rush Twp.	PA	AD	9

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:											
	SERVICE ELECTRIC CA	ABLEVISIO	N, INC	•					655			
E	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES											
E	In General: The information in space E should cover all categories of secondary transmission service of the cable											
Casandan	system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information											
Secondary Transmission	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).											
Service: Sub-	<b>Number of Subscribers:</b> Both blocks in space E call for the number of subscribers to the cable system, broken											
scribers and	down by categories of secondar											
Rates	each category by counting the n							ns charged				
	separately for the particular serv											
	Rate: Give the standard rate of											
	unit in which it is generally billed category, but do not include disc						ns within a	a particular rate				
	Block 1: In the left-hand block					condary transm	ission serv	vice that cable				
	systems most commonly provide			-		•						
	that applies to your system. Not			-		-						
	categories, that person or entity											
	subscriber who pays extra for ca						Inder "Serv	vice 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, t	-		•								
	with the number of subscribers a											
	sufficient.											
	BLC	DCK 1 NO. OF	:				BLOC	NO. OF				
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RATE			
	Residential:			• • • • • •								
	Service to first set		0,920	\$ 19.95								
	Service to additional set(s)	6	6,176	-								
	• FM radio (if separate rate)		20	¢ 574.47								
	Motel, hotel Commercial		28 55	\$    574.47 \$  1,053.85								
	Converter		~~~	ψ 1,000.00								
	Residential	3	9,032	\$ 4.95								
	Non-residential		-,									
	SERVICES OTHER THAN SEC	ONDARY TR	ANSMIS	SSIONS: RATE	ES							
F	In General: Space F calls for ra		,		•	• •						
I	not covered in space E, that is, t					,	,					
Services	service for a single fee. There and furnished at cost or (2) services											
Other Than	amount of the charge and the ur											
Secondary	enter only the letters "PP" in the	rate column.	-			-						
ransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.											
Rates	<b>Block 2:</b> 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) descrip		-					ne ionn or a				
		BLO						BLOCK 2				
	CATEGORY OF SERVICE	RATE		GORY OF SER	VICE	RATE	CATEGO	DRY OF SERVICE	RATE			
	Continuing Services:			ation: Non-res								
	Continuing Cervices.	* 47.05	• Mo	tel, hotel								
	Pay cable	\$ 17.95		mmercial								
	-	\$ 17.95	• Co	mmercial								
	• Pay cable	\$ 17.95	-	y cable								
	• Pay cable • Pay cable—add'l channel	\$ 17.95	• Pa • Pa	y cable y cable-add'l cl	hannel							
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> </ul>	\$ 17.95	• Pa • Pa • Fire	y cable y cable-add'l cl e protection								
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> </ul>	\$35/\$61	• Pa • Pa • Fire • Bu	y cable y cable-add'l cl e protection rglar protection								
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> </ul>		• Pa • Pa • Fire • Bu	y cable y cable-add'l cl e protection rglar protection <b>services:</b>								
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>	\$35/\$61 \$17/\$26	• Pa • Pa • Fire • Bu • Bu • Re	y cable y cable-add'l cl e protection rglar protection <b>services:</b> connect		\$ 35.00						
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> </ul>	\$35/\$61	• Pa • Pa • Fire • Bu • Bu • Bu • Re • Dis	y cable y cable-add'l cl e protection rglar protection <b>services:</b> connect sconnect								
	<ul> <li>Pay cable</li> <li>Pay cable—add'l channel</li> <li>Fire protection</li> <li>Burglar protection</li> <li>Installation: Residential</li> <li>First set</li> <li>Additional set(s)</li> <li>FM radio (if separate rate)</li> </ul>	\$35/\$61 \$17/\$26	• Pa • Pa • Fire • Bu • Bu • Re • Dis • Ou	y cable y cable-add'l cl e protection rglar protection <b>services:</b> connect	I	\$ 35.00 \$ 43.00 \$35/\$43						

I FGAL NAME OF		(STEM:			SYSTEM ID	¥		
	AME OF OWNER OF CABLE SYSTEM: SYSTEM ID ICE ELECTRIC CABLEVISION, INC. 655							
		•						
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 [section: 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								
	cifc FCC rules, regul	•		is carried by your	cable system on a substitute program	Television		
station was ca • List the station basis. For furl in the paper S	arried only on a subs here, and also in sp ther information con SA3 form.	stitute basis ace I, if the st cerning subst	ation was carrie itute basis statio	ed both on a subs ons, see page (v)	nent and Program Log)—if the titute basis and also on some othe of the general instructions locatec es such as HBO, ESPN, etc. Identify			
		-			nation. For example, report multi			
cast stream as "\ WETA-simulcast		streams mus	t be reported in	column 1 (list ea	ch stream separately; for example			
	/	ber the FCC	has assigned to	the television sta	ation for broadcasting over-the-air ir			
on which your ca Column 3: In	ble system carried t dicate in each case	the station whether the s	station is a netw	ork station, an in	s may be different from the channe dependent station, or a noncommercia			
(for independent For the meaning	multicast), "E" (for r of these terms, see	noncommercia page (v) of th	al educational), ne general instru	or "E-M" (for non uctions located in	icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form res". If not, enter "No". For an ex			
Column 5: If cable system can carried the distar For the retran	ried the distant stati nt station on a part-ti smission of a distan	'es" in column ion during the ime basis bec it multicast str	a 4, you must co accounting per cause of lack of ream that is not	omplete column 5 iod. Indicate by e activated channe subject to a roya	, stating the basis on which you ntering "LAC" if your cable syster			
explanation of th Column 6: G FCC. For Mexica	ese three categories ive the location of ea	s, see page (v ach station. Fe ons, if any, giv nnel line-ups	y) of the general or U.S. stations ve the name of t	instructions loca , list the commun the community w e space G for eac	other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the ith which the station is identifed th channel line-up.			
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?					
SIGN	CHANNEL		4. DIO 17 (141 :	5 BASIS OF		_		
	NUMBER	OF STATION	(Yes or No)	5. BASIS OF CARRIAGE (If Distant)	6. LOCATION OF STATION	_		
WYOU	NUMBER 22	-	```	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (CBS)	-		
WYOU WBRE		STATION	, , , , , , , , , , , , , , , , , , ,	CARRIAGE				
	22	STATION N	NO	CARRIAGE	SCRANTON, PA (CBS)			
WBRE	22 28	STATION N N	NONO	CARRIAGE	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC)	additional information		
WBRE	22 28 33	STATION N N E	NO NO NO	CARRIAGE	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS)	additional information		
WBRE	22 28	STATION N N	NONO	CARRIAGE	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC)	additional information		
WBRE WITF WNEP	22 28 33 16	STATION N N E N	NO NO NO NO	CARRIAGE	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC)	additional information		
WBRE WITF WNEP WNEP-2	22 28 33 16	STATION N N E N	NO NO NO NO	CARRIAGE	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (Antenna)	additional information		
NBRE NITF NNEP NNEP-2 NPIX	22 28 33 16 16.2	STATION N N E N	NO NO NO NO	CARRIAGE (If Distant)	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (Antenna) NEW YORK, NY (CW)	additional information		
WBRE WITF WNEP WNEP-2 WPIX WQMY	22 28 33 16 16.2 11	STATION N N E N I-M	NO NO NO NO YES NO	CARRIAGE (If Distant)	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (Antenna) NEW YORK, NY (CW) WILLIAMSPORT, PA (MyTV)	additional information		
WBRE WITF WNEP WNEP-2 WPIX WQMY WQPX	22 28 33 16 16.2 11 53 64	STATION N N E N I-M	NO NO NO NO NO YES NO NO	CARRIAGE (If Distant)	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (Antenna) NEW YORK, NY (CW) WILLIAMSPORT, PA (MyTV) SCRANTON, PA (ION)	additional information		
WBRE MITF WNEP WNEP-2 WPIX WQMY WQPX WSWB	22 28 33 16 16.2 11 53 64 38	STATION N N E N I-M I I I I I	NO NO NO NO YES NO NO NO	CARRIAGE (If Distant)	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (Antenna) NEW YORK, NY (CW) WILLIAMSPORT, PA (MyTV) SCRANTON, PA (ION) SCRANTON, PA (CW)	additional information		
WBRE WITF WNEP WNEP-2 WPIX WQMY WQPX WSWB WSWB-2	22 28 33 16 16.2 11 53 64 38 38.2	STATION N N E N I-M I I I I I I I	NO NO NO NO NO YES NO NO NO NO	CARRIAGE (If Distant)	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (Antenna) NEW YORK, NY (CW) WILLIAMSPORT, PA (MyTV) SCRANTON, PA (ION) SCRANTON, PA (ION) SCRANTON, PA (CW)	additional information		
WBRE MITF WNEP WNEP-2 WPIX WQMY WQMY WQPX WSWB WSWB-2 WSWB-3	22 28 33 16 16.2 11 53 64 38 38.2 38.3	STATION N N E I-M I I I I I I I I I I I I I I I I I I	NO NO NO NO NO YES NO NO NO NO	CARRIAGE (If Distant)	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (Antenna) NEW YORK, NY (CW) WILLIAMSPORT, PA (MyTV) SCRANTON, PA (ION) SCRANTON, PA (ION) SCRANTON, PA (CW) SCRANTON, PA (Comet)	additional information		
WBRE WITF WNEP WNEP-2 WPIX WQMY WQPX WSWB WSWB-2 WSWB-3 WWOR	22 28 33 16 16.2 11 53 64 38 38.2 38.3 9	STATION N N E I-M I I I I I I I I I I I I I I I I I I	NO NO NO NO NO YES NO NO NO NO NO YES	CARRIAGE (If Distant)	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (ABC) SCRANTON, PA (Antenna) NEW YORK, NY (CW) WILLIAMSPORT, PA (MyTV) SCRANTON, PA (ION) SCRANTON, PA (ION) SCRANTON, PA (CW) SCRANTON, PA (COMET) NEW YORK, NY (MyTV)	additional information		
WBRE MITF WNEP WNEP-2 WPIX WQMY WQPX WSWB WSWB-2 WSWB-3 WWOR WOLF	22 28 33 16 16.2 11 53 64 38 38.2 38.3 9 56	STATION N N E N I-M I I I I I I I I I I I I I I I I I I	NO NO NO NO NO YES NO NO NO NO NO NO NO NO NO NO NO NO NO	CARRIAGE (If Distant)	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (ABC) SCRANTON, PA (Antenna) NEW YORK, NY (CW) WILLIAMSPORT, PA (MyTV) SCRANTON, PA (ION) SCRANTON, PA (ION) SCRANTON, PA (ION) SCRANTON, PA (CW) SCRANTON, PA (COMET) NEW YORK, NY (MyTV) HAZLETON, PA (FOX)	additional information		
WBRE WITF WNEP WNEP-2 WPIX WQMY WQPX WSWB WSWB-2 WSWB-3 WWOR	22 28 33 16 16.2 11 53 64 38 38.2 38.3 9	STATION N N E I-M I I I I I I I I I I I I I I I I I I	NO NO NO NO NO YES NO NO NO NO NO YES	CARRIAGE (If Distant)	SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS) SCRANTON, PA (ABC) SCRANTON, PA (ABC) SCRANTON, PA (Antenna) NEW YORK, NY (CW) WILLIAMSPORT, PA (MyTV) SCRANTON, PA (ION) SCRANTON, PA (ION) SCRANTON, PA (CW) SCRANTON, PA (Comet) NEW YORK, NY (MyTV)	additional information		

LEGAL NAME OF						
	OWNER OF CABLE SY LECTRIC CABI				SYSTEM ID# 6553	Name
		,	INC.		6555	
			· · ·		is and low power television stations) ed only on a part-time basis under	G
•••			• • •	. ,	tain network programs [section:	Ŭ
	, ,,,,		-	61(e)(2) and (4))];	and (2) certain stations carried on a	Primary
	n basis, as explaine			s carried by your	cable system on a substitute program	Transmitters Television
	fc FCC rules, regul	-	-	is carried by your	substance program	relevision
	•		st it in space I (t	he Special Staten	nent and Program Log)—if the	
	rried only on a subs		ation was carrie	d both on a subs	titute basis and also on some othe	
	-				of the general instructions located	
in the paper SA		l cian. Do not	roport originatio	n program convia	as such as HRO, ESPN, ata, Idantifi	
					es such as HBO, ESPN, etc. Identify ation. For example, report multi	
					ch stream separately; for example	
WETA-simulcast).		ber the ECC I	has assigned to	the television sta	tion for broadcasting over-the-air ir	
			0		s may be different from the channe	
on which your cab	ole system carried t	he station		0		
					lependent station, or a noncommercia icast), "I" (for independent), "I-M	
		•	, ·	•	commercial educational multicast)	
For the meaning of	of these terms, see	page (v) of th	e general instru	uctions located in	the paper SA3 form	
	ne station is outside service area, see p				res". If not, enter "No". For an ex	
					, stating the basis on which you	
•		-		-	ntering "LAC" if your cable syster	
	t station on a part-ti mission of a distan				capacity ty payment because it is the subjec	
					ystem or an association representin	
-		smitter or an a	association repr	oconting the prim		
tion "F" (avampt)			•		ary transmitter, enter the designa	
· · /			you carried the	channel on any o	other basis, enter "O." For a furthe	
explanation of the	se three categories	s, see page (v	you carried the ) of the general	channel on any of instructions locat		
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FORM SA3E. PAGE	3.					
	WNER OF CABLE SY				SYSTEM ID#	Name
SERVICE EL	ECTRIC CABL	EVISION,	INC.		6553	Humo
PRIMARY TRANSMI	TTERS: TELEVISIO	NC				
					ns and low power television stations)	G
	• •		• • •	. ,	ed only on a part-time basis under rtain network programs [section:	9
•			· · ·	•	; and (2) certain stations carried on a	Primary
substitute program				a carried by your	cable system on a substitute program	Transmitters:
basis under specifc				is carried by your	cable system on a substitute program	Television
<ul> <li>Do not list the stat</li> </ul>	ion here in space	G-but do lis		he Special Stater	ment and Program Log)—if the	
	ed only on a subs		ation was carrie	ed both on a subs	titute basis and also on some othe	
	•				of the general instructions located	
in the paper SA3		sian Do not	report originatio	on program servic	ces such as HBO, ESPN, etc. Identify	
		-			nation. For example, report multi	
	TA-2". Simulcast	streams mus	t be reported in	column 1 (list ea	ch stream separately; for example	
WETA-simulcast). Column 2: Give	the channel num	ber the FCC	has assigned to	the television sta	ation for broadcasting over-the-air ir	
its community of lice	ense. For example	e, WRC is Ch	-		s may be different from the channe	
on which your cable Column 3: Indic	,		station is a netw	ork station an in	dependent station, or a noncommercia	
					ticast), "I" (for independent), "I-M	
					commercial educational multicast) the paper SA3 form	
					Yes". If not, enter "No". For an ex	
planation of local se						
-			•		i, stating the basis on which you entering "LAC" if your cable syster	
carried the distant s	station on a part-ti	me basis bec	ause of lack of	activated channe	l capacity	
					Ity payment because it is the subjec system or an association representin	
					hary transmitter, enter the designa	
· · · /					other basis, enter "O." For a furthe	
					ted in the paper SA3 form ity to which the station is licensed by the	
					ith which the station is identifed	
Note: If you are util	izing multiple cha	nnel line-ups,	, use a separate	e space G for eac	ch channel line-up.	
		CHANN	EL LINE-UP	AB		
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)		
WYOU	22	N	NO		SCRANTON, PA (CBS)	
WBRE	28	N	NO		WILKES BARRE, PA (NBC)	
WPVI	6	N	YES	0	PHILADELPHIA, PA (ABC)	
WITF	33	Е	NO		HARRISBURG, PA (PBS)	
WNEP	16	N	NO		SCRANTON, PA (ABC)	
WNEP-2	16.2	I-M	NO		SCRANTON, PA (Antenna)	
WPIX	11	I	YES	0	NEW YORK, NY (CW)	
	53					
WQMY			NO		WILLIAMSPORT, PA (MyTV)	
WQPX	64		NO			
WSWB	38	<b>I</b>	NO		SCRANTON, PA (CW)	
WSWB-2	38.2	I-M	NO		SCRANTON, PA (MeTV)	
WSWB-3	38.3	I-M	NO		SCRANTON, PA (Comet)	
WWOR	9	I	YES	0	NEW YORK, NY (MyTV)	
WOLF	56	I	NO		HAZLETON, PA (FOX)	
WVIA	44	Е	NO		SCRANTON, PA (PBS)	
WVIA-2	44.2	E-M	NO		SCRANTON, PA (PBS Kids)	
	-17.6					

FORM SA3E. PAGE	3.					
	OWNER OF CABLE SY				SYSTEM ID#	Name
SERVICE EL	ECTRIC CABI	EVISION,	INC.		6553	
PRIMARY TRANSM	IITTERS: TELEVISI	ON				
carried by your cal FCC rules and reg	ble system during ulations in effect o	the accountin n June 24, 19	g period except 981, permitting t	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections rand (2) certain stations carried on a	<b>G</b> Primary
substitute program	basis, as explaine	ed in the next	paragraph		cable system on a substitute program	Transmitters: Television
basis under specif	c FCC rules, regul	ations, or autl	norizations			
station was car	ried only on a subs	stitute basis			nent and Program Log)—if the titute basis and also on some othe	
in the paper SA	3 form.	Ū			of the general instructions located	
each multicast stre	eam associated wit	th a station ac	cording to its o	ver-the-air design	ation. For example, report multi	
		streams mus	t be reported in	column 1 (list ea	ch stream separately; for example	
WETA-simulcast). Column 2: Give		ber the FCC	has assigned to	the television sta	ation for broadcasting over-the-air ir	
on which your cab	le system carried t	he station		0	s may be different from the channe	
					dependent station, or a noncommercia icast), "I" (for independent), "I-M	
		•	,	•	commercial educational multicast)	
					the paper SA3 form (es". If not, enter "No". For an ex	
					he paper SA3 form	
Column 5: If yo	ou have entered "Y	'es" in columr	n 4, you must co	omplete column 5	, stating the basis on which you	
cable system carri carried the distant	ed the distant stati station on a part-ti	on during the	accounting per ause of lack of	od. Indicate by e activated channe	ntering "LAC" if your cable syster I capacity	
For the retrans	mission of a distan	t multicast str	eam that is not	subject to a royal	ty payment because it is the subjec	
					ystem or an association representin ary transmitter, enter the designa	
•				• ·	other basis, enter "O." For a furthe	
					ted in the paper SA3 form	
					ity to which the station is licensed by the the which the station is identifed	
Note: If you are ut						
		CHANN	EL LINE-UP	AB - PAGE 2	2	
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)		
WVIA-3	44.3	E-M	NO		SCRANTON, PA (PBS Create)	
WBRE-2	28.2	I-M	NO		WILKES BARRE, PA (LAFF)	
WBRE-3	28.3	I-M	NO		WILKES BARRE, PA (RewindTV)	
WYOU-2	22.2	I-M	NO		SCRANTON, PA (Court TV)	
WYOU-3	22.3	I-M	NO		SCRANTON, PA (Bounce)	
WYOU-4	22.4	I-M	NO		SCRANTON, PA (Cozi)	
WBRE-4	28.4	I-M	NO		WILKES BARRE, PA (True Crime)	
WSWB-4	38.4	I-M	NO		SCRANTON, PA (ASN)	
WOLF-4	56.4	I-M	NO		HAZLETON, PA (Charge)	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OWN					SYSTEM ID#	Name
SERVICE ELEC	CTRIC CABL	EVISION,	INC.		6553	Nume
PRIMARY TRANSMITT	ERS: TELEVISIO	ON				
carried by your cable FCC rules and regula	system during t tions in effect o	he accountin n June 24, 19	g period except 981, permitting t	(1) stations carri he carriage of ce	ns and low power television stations) ed only on a part-time basis under rtain network programs [section: ; and (2) certain stations carried on a	<b>G</b> Primary
substitute program ba	isis, as explaine	ed in the next	paragraph		cable system on a substitute program	Transmitters: Television
basis under specifc F						
station was carried	l only on a subs	titute basis			nent and Program Log)—if the titute basis and also on some othe	
basis. For further in the paper SA3 for	nformation conc	cerning subst	itute basis statio	ons, see page (v)	of the general instructions located	
		-	• •		ces such as HBO, ESPN, etc. Identify nation. For example, report multi	
			-	-	ich stream separately; for example	
,	e channel num	ber the FCC	has assigned to	the television sta	ation for broadcasting over-the-air ir	
	•		annel 4 in Was	hington, D.C. Thi	s may be different from the channe	
on which your cable s Column 3: Indicate			tation is a netw	ork station, an in	dependent station, or a noncommercia	
educational station, by	y entering the le	etter "N" (for r	network), "N-M"	(for network mult	ticast), "I" (for independent), "I-M	
(for independent multi For the meaning of the					commercial educational multicast)	
					Yes". If not, enter "No". For an ex	
planation of local serv						
					i, stating the basis on which you entering "LAC" if your cable syster	
carried the distant sta						
					Ity payment because it is the subjec	
-					system or an association representin hary transmitter, enter the designa	
•				• ·	other basis, enter "O." For a furthe	
					ted in the paper SA3 form	
					ity to which the station is licensed by the ith which the station is identifed	
Note: If you are utilizi				•		
		CHANN	EL LINE-UP	AC		
1. CALL	2. B'CAST	3. TYPE	4. DISTANT?	5. BASIS OF	6. LOCATION OF STATION	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
	NUMBER	STATION		(If Distant)		
WYOU	22	N	NO		SCRANTON, PA (CBS)	
WBRE	28	N	NO		WILKES BARRE, PA (NBC)	
WCAU	10	N	YES	0	PHILADELPHIA, PA (NBC)	
WPVI	6	N	YES	0	PHILADELPHIA, PA (ABC)	
WITF	33	Е	YES	0	HARRISBURG, PA (PBS)	
WNEP	16	N	NO		SCRANTON, PA (ABC)	
WNEP-2	16.2	I-M	NO		SCRANTON, PA (Antenna)	
WPIX	11	I	YES	0	NEW YORK, NY (CW)	
WQMY	53	I	NO		WILLIAMSPORT, PA (MyTV)	
WQPX	64	I	NO		SCRANTON, PA (ION)	
WSWB	38		NO		SCRANTON, PA (CW)	
WSWB-2	38.2	I-M	NO		SCRANTON, PA (MeTV)	
WSWB-3	38.3	I-M	NO		SCRANTON, PA (Comet)	
WWOR	9	I	YES	0	NEW YORK, NY (MyTV)	
WOLF	56	I	NO		HAZLETON, PA (FOX)	
WVIA	44	E	NO		SCRANTON, PA (PBS)	
WVIA-2	44.2	E-M	NO		SCRANTON, PA (PBS Kids)	
	77.6	C-141				

FORM SA3E. PAGE	3.					
	WNER OF CABLE SY				SYSTEM ID#	Name
SERVICE EL	ECTRIC CABI	EVISION,	INC.		6553	
PRIMARY TRANSMI	TTERS: TELEVISI	ON				
carried by your cab	le system during	the accountin	g period except	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [section:	G
-				-	and (2) certain stations carried on a	Primary
substitute program	basis, as explaine	ed in the next	paragraph			Transmitters:
basis under specifo		-	-	s carried by your	cable system on a substitute program	Television
				he Special Stater	nent and Program Log)—if the	
	ed only on a subs		ation was carrie	d both on a subs	titute basis and also on some othe	
					of the general instructions located	
in the paper SA		sign Do not	roport originatio	n program convic	es such as HBO, ESPN, etc. Identify	
		-			ation. For example, report multi	
	TA-2". Simulcast	streams mus	t be reported in	column 1 (list ea	ch stream separately; for example	
WETA-simulcast). Column 2: Give	the channel num	ber the FCC	has assigned to	the television sta	ation for broadcasting over-the-air ir	
	•		annel 4 in Was	hington, D.C. Thi	s may be different from the channe	
on which your cable Column 3: Indic			tation is a netw	ork station. an ind	dependent station, or a noncommercia	
educational station	, by entering the le	etter "N" (for r	network), "N-M"	(for network mult	icast), "I" (for independent), "I-M	
· ·	<i>/</i> · (				commercial educational multicast) the paper SA3 form	
Column 4: If the	e station is outside	e the local ser	vice area, (i.e. "	distant"), enter "ነ	/es". If not, enter "No". For an ex	
planation of local se					ne paper SA3 form , stating the basis on which you	
					ntering "LAC" if your cable syster	
carried the distant	station on a part-ti	me basis bec	ause of lack of	activated channe	l capacity	
					ty payment because it is the subjec ystem or an association representin	
the cable system a	nd a primary trans	smitter or an a	association repr	esenting the prim	ary transmitter, enter the designa	
· · /					other basis, enter "O." For a furthe ted in the paper SA3 form	
					ity to which the station is licensed by the	
				-	th which the station is identifed	
Note: If you are util	lizing multiple cha	nnel line-ups,	use a separate	space G for eac	h channel line-up.	
		CHANN	EL LINE-UP	AC - PAGE 2	2	
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)		
WVIA-3	44.3	E-M	NO		SCRANTON, PA (PBS Create)	
WBRE-2	28.2	I-M	NO		WILKES BARRE, PA (LAFF)	
WBRE-3	28.3	I-M	NO		WILKES BARRE, PA (RewindTV)	
WYOU-2	22.2	I-M	NO		SCRANTON, PA (Court TV)	
WYOU-3	22.3	I-M	NO		SCRANTON, PA (Bounce)	
WYOU-4	22.4	I-M	NO		SCRANTON, PA (Cozi)	
WBRE-4	28.4	I-M	NO		WILKES BARRE, PA (True Crime)	
WSWB-4	38.4	I-M	NO		SCRANTON, PA (ASN)	
WOLF-4			NO			
WOLF-4	56.4	I-M	NU		HAZLETON, PA (Charge)	

FORM SA3E. PAG						
LEGAL NAME OF	F OWNER OF CABLE SY	STEM:			SYSTEM ID#	Name
SERVICE E	ELECTRIC CABL	EVISION,	INC.		6553	Name
PRIMARY TRANS	MITTERS: TELEVISIO	NC				
carried by your c FCC rules and re	cable system during t egulations in effect o	he accountin n June 24, 19	g period except 981, permitting t	(1) stations carrie he carriage of ce	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections	G
substitute progra	am basis, as explaine	ed in the next	paragraph		; and (2) certain stations carried on a cable system on a substitute program	Primary Transmitters: Television
	cifc FCC rules, regula	•		is carried by your	cable system on a substitute program	Television
<ul> <li>Do not list the s station was ca</li> </ul>	station here in space arried only on a subs	G—but do lis stitute basis	st it in space I (t		nent and Program Log)—if th€	
	ther information cond				titute basis and also on some othe of the general instructions located	
		-			es such as HBO, ESPN, etc. Identify	
			-	-	ation. For example, report multi ch stream separately; for example	
WETA-simulcast Column 2: Gi	t). ive the channel num	ber the FCC	has assigned to	the television sta	ation for broadcasting over-the-air ir	
-	license. For example able system carried t		annel 4 in Was	hington, D.C. Thi	s may be different from the channe	
			station is a netw	ork station, an ind	dependent station, or a noncommercia	
		•	,		icast), "I" (for independent), "I-M	
· ·	: multicast), "E" (for n ⊧of these terms, see		· · ·	•	commercial educational multicast) the paper SA3 form	
Column 4: If	the station is outside	the local ser	vice area, (i.e. "	ʻdistant"), enter "ነ	es". If not, enter "No". For an ex	
	l service area, see p					
					, stating the basis on which you ntering "LAC" if your cable syster	
	nt station on a part-ti					
	smission of a distant	t multicast str			ty payment because it is the subjec	
of a written agree	nsmission of a distant ement entered into o	t multicast str n or before J	une 30, 2009, b	etween a cable s	ystem or an association representin	
of a written agree the cable system	nsmission of a distan ement entered into o n and a primary trans	t multicast str n or before J mitter or an a	une 30, 2009, b association repr	etween a cable s esenting the prim		
of a written agree the cable system tion "E" (exempt) explanation of th	nsmission of a distant ement entered into o n and a primary trans ). For simulcasts, als uese three categories	t multicast str n or before J mitter or an a o enter "E". If s, see page (v	une 30, 2009, b association repro f you carried the r) of the general	etween a cable s esenting the prim channel on any instructions loca	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi	esmission of a distan ement entered into o n and a primary trans ). For simulcasts, als lese three categories ive the location of ea	t multicast str n or before J smitter or an a o enter "E". If s, see page (v ach station. Fo	une 30, 2009, b association repre f you carried the y) of the general or U.S. stations,	etween a cable s esenting the prim channel on any instructions loca list the communi	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi FCC. For Mexica	nsmission of a distan- ement entered into o n and a primary trans ). For simulcasts, als uese three categories ive the location of ea an or Canadian statio	t multicast str n or before Ji mitter or an a o enter "E". If a, see page (v ach station. Fe ons, if any, giv	une 30, 2009, b association repre- you carried the or 0 of the general or U.S. stations, we the name of t	etween a cable s esenting the prim channel on any instructions loca list the communit the community wi	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi FCC. For Mexica	esmission of a distan ement entered into o n and a primary trans ). For simulcasts, als lese three categories ive the location of ea	t multicast str n or before Ju mitter or an a o enter "E". If a, see page (v ach station. Fo ons, if any, giv nnel line-ups,	une 30, 2009, b association repre- you carried the or 0 of the general or U.S. stations, we the name of t	etween a cable s esenting the prim channel on any instructions loca list the communit the community wi space G for eac	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi FCC. For Mexica <b>Note:</b> If you are	asmission of a distant ement entered into o in and a primary trans ). For simulcasts, als lese three categories ive the location of ea an or Canadian static utilizing multiple cha	t multicast str n or before Ju mitter or an a o enter "E". If a, see page (v ach station. Fo ons, if any, giv nnel line-ups,	une 30, 2009, b association repri- f you carried the c) of the general or U.S. stations, ve the name of t , use a separate EL LINE-UP	etween a cable s esenting the prim channel on any instructions loca list the communit the community wi e space G for eac AD	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi FCC. For Mexica	nsmission of a distan- ement entered into o n and a primary trans ). For simulcasts, als uese three categories ive the location of ea an or Canadian statio	t multicast str n or before J mitter or an a o enter "E". If s, see page (v ich station. Fe ons, if any, giv nnel line-ups, CHANN	une 30, 2009, b association repri- f you carried the y of the general or U.S. stations, we the name of t , use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable s esenting the prim channel on any instructions loca list the communit the community wi space G for eac	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifed h channel line-up.	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi FCC. For Mexica <b>Note:</b> If you are 1. CALL	asmission of a distant ement entered into o in and a primary trans ). For simulcasts, als uses three categories ive the location of ea an or Canadian static utilizing multiple cha 2. B'CAST CHANNEL	t multicast str n or before Ju mitter or an a o enter "E". If s, see page (v ich station. Fe ons, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF	une 30, 2009, b association repri- f you carried the y of the general or U.S. stations, we the name of t , use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable s esenting the prim channel on any instructions loca list the communit the community wi space G for eac AD 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ity to which the station is licensed by the th which the station is identifed h channel line-up.	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi FCC. For Mexica <b>Note:</b> If you are in 1. CALL SIGN	Asmission of a distant ement entered into o in and a primary trans ). For simulcasts, als uese three categories ive the location of ea an or Canadian static utilizing multiple cha 2. B'CAST CHANNEL NUMBER 22	t multicast str n or before Ju mitter or an a o enter "E". If s, see page (v ich station. Fe ons, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION <b>N</b>	une 30, 2009, b association repro- f you carried the y of the general or U.S. stations, we the name of t use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No) <b>NO</b>	etween a cable s esenting the prim channel on any instructions loca list the communit the community wi space G for eac AD 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifed h channel line-up. 6. LOCATION OF STATION SCRANTON, PA (CBS)	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi FCC. For Mexica <b>Note:</b> If you are to 1. CALL SIGN	asmission of a distant ement entered into on and a primary trans ). For simulcasts, als uese three categories ive the location of ea an or Canadian static utilizing multiple cha 2. B'CAST CHANNEL NUMBER	t multicast str n or before Ju mitter or an a o enter "E". If s, see page (v ach station. Fo ons, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION	une 30, 2009, b association repri- you carried the yot the general or U.S. stations, ve the name of t , use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No)	etween a cable s esenting the prim channel on any instructions loca list the communit the community wi space G for eac AD 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifed h channel line-up.	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi FCC. For Mexica <b>Note:</b> If you are to 1. CALL SIGN <b>WYOU</b> <b>WBRE</b>	Asmission of a distant ement entered into on and a primary trans ). For simulcasts, als lese three categories ive the location of ea an or Canadian static utilizing multiple cha 2. B'CAST CHANNEL NUMBER 22 28	t multicast str n or before J mitter or an a o enter "E". If , see page (v cch station. Fe ons, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION <b>N</b>	une 30, 2009, b association repri- f you carried the y of the general or U.S. stations, ve the name of t , use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No) <b>NO</b> <b>NO</b>	etween a cable s esenting the prim channel on any instructions loca list the communit the community wi space G for eac AD 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifec h channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION SCRANTON, PA (CBS) WILKES BARRE, PA (NBC)	
of a written agree the cable system tion "E" (exempt) explanation of th <b>Column 6:</b> Gi FCC. For Mexica <b>Note:</b> If you are to 1. CALL SIGN <b>WYOU</b> <b>WBRE</b>	As a series of a distant ement entered into on and a primary trans ). For simulcasts, als uese three categories ive the location of ea an or Canadian static utilizing multiple cha 2. B'CAST CHANNEL NUMBER 22 28 33	t multicast str n or before Ju- mitter or an a o enter "E". If s, see page (v ich station. Fe ons, if any, giv nnel line-ups, <b>CHANN</b> 3. TYPE OF STATION <b>N</b> <b>N</b>	une 30, 2009, b association repri- f you carried the the general or U.S. stations, ve the name of f , use a separate <b>EL LINE-UP</b> 4. DISTANT? (Yes or No) <b>NO</b> <b>NO</b>	etween a cable s esenting the prim channel on any instructions loca list the communit the community wi space G for eac AD 5. BASIS OF CARRIAGE	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifed h channel line-up. 6. LOCATION OF STATION 6. LOCATION OF STATION SCRANTON, PA (CBS) WILKES BARRE, PA (NBC) HARRISBURG, PA (PBS)	
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FORM SA3E. PAGE	3.					
	OWNER OF CABLE SY				SYSTEM ID#	Name
SERVICE EL	ECTRIC CABI	EVISION,	INC.		6553	
PRIMARY TRANSM	IITTERS: TELEVISI	ON				
carried by your cab	ble system during	the accountin	g period except	(1) stations carrie	is and low power television stations) ed only on a part-time basis under rtain network programs [section:	G
-			•	-	and (2) certain stations carried on a	Primary
substitute program				is carried by your	cable system on a substitute program	Transmitters: Television
basis under specifo		-	•	is carried by your	cable system on a substitute program	Television
station was carr	ried only on a subs	stitute basis			nent and Program Log)—if the	
	er information con				titute basis and also on some othe of the general instructions located	
					es such as HBO, ESPN, etc. Identify ation. For example, report multi	
					ch stream separately; for example	
WETA-simulcast). Column 2: Give	e the channel num	ber the FCC	has assigned to	the television sta	ation for broadcasting over-the-air ir	
•			annel 4 in Was	hington, D.C. Thi	s may be different from the channe	
on which your cabl Column 3: Indio			tation is a netw	ork station, an inc	dependent station, or a noncommercia	
	• •	•	,		icast), "I" (for independent), "I-M	
· ·	· · ·		,.	•	commercial educational multicast) the paper SA3 form	
Column 4: If the	e station is outside	the local ser	vice area, (i.e. '	'distant"), enter "ነ	es". If not, enter "No". For an ex	
planation of local s Column 5: If yo					ne paper SA3 form , stating the basis on which you	
cable system carrie	ed the distant stati	on during the	accounting per	iod. Indicate by e	ntering "LAC" if your cable syster	
carried the distant					l capacity ty payment because it is the subjec	
	mission of a distan			subject to a royal	ty payment because it is the subjec	
of a written agreem	nent entered into c	on or before J	une 30, 2009, b	etween a cable s		
the cable system a	and a primary trans	smitter or an a	association repr	esenting the prim	ystem or an association representin ary transmitter, enter the designa	
the cable system a tion "E" (exempt). F	and a primary trans For simulcasts, als	smitter or an a so enter "E". If	association repr f you carried the	esenting the prim	ystem or an association representin ary transmitter, enter the designa other basis, enter "O." For a furthe	
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FORM SA3E. PAGE						
	OWNER OF CABLE SY				SYSTEM ID#	Name
SERVICE E		EVISION,			6553	
PRIMARY TRANSI	ITTERS: TELEVISI	ON				
In General: In spa carried by your ca FCC rules and reg 76.59(d)(2) and (4 substitute program <b>Substitute Ba</b> basis under specif • Do not list the sta station was car • List the station h basis. For furth in the paper S/ Column 1: List each multicast stre cast stream as "W WETA-simulcast). Column 2: Giv its community of li on which your cab Column 3: Ind educational station (for independent r For the meaning c Column 4: If th planation of local s	ace G, identify ever ble system during f gulations in effect o ly, 76.61(e)(2) and n basis, as explaine <b>sis Stations:</b> With fc FCC rules, regula ation here in space rried only on a subs ere, and also in spa- ere information cond A3 form. t each station's call eam associated wit /ETA-2". Simulcast re the channel num icense. For example ble system carried t icate in each case n, by entering the le multicast), "E" (for m of these terms, see he station is outside service area, see p ou have entered "Y ied the distant stati	y television si the accounting n June 24, 19 (4), or 76.63 ( ed in the next respect to any ations, or autil G—but do lis stitute basis ace I, if the st cerning substi sign. Do not th a station ac streams mus ber the FCC I e, WRC is Ch he station whether the s etter "N" (for r ioncommercia page (v) of the e's" in column on during the	g period except 981, permitting t ireferring to 76.6 paragraph y distant station horizations st it in space I (the ation was carried itute basis static report originatic coording to its ov t be reported in has assigned to hannel 4 in Was itation is a network), "N-M" al educational),, ie general instru- vice area, (i.e. " general instruct of 4, you must co accounting per	(1) stations carrie he carriage of cer 51(e)(2) and (4))]; s carried by your he Special Stater ed both on a subs ons, see page (v) on program servic ver-the-air design column 1 (list each hington, D.C. This or k station, an ind (for network mult or "E-M" (for none ictions located in distant"), enter "Y tions located in th omplete column 5	, stating the basis on which you ntering "LAC" if your cable syster	G Primary Transmitters: Television
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LEGAL NAME OF OW						
					SYSTEM ID#	Name
SERVICE ELE	CTRIC CABL	EVISION,	INC.		6553	
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 b Substitute Basis basis under specific I • Do not list the statio station was carrie • List the station here basis. For further in the paper SA3 Column 1: List ea each multicast streau cast stream as "WET WETA-simulcast). Column 2: Give t its community of lice on which your cable Column 3: Indica educational station, I (for independent mul For the meaning of tt Column 4: If the planation of local ser Column 5: If you cable system carried carried the distant st For the retransmi	e G, identify ever a system during t ations in effect o 76.61(e)(2) and t asis, as explaine <b>Stations:</b> With FCC rules, regula on here in space d only on a subs a, and also in spa- information conc form. ach station's call m associated wit rA-2". Simulcast the channel num nse. For example system carried ti the in each case oy entering the le ticast), "E" (for n hese terms, see station is outside vice area, see p have entered "Y the distant stati- ation on a part-ti ssion of a distant	y television si he accounting n June 24, 19 (4), or 76.63 ( din the next respect to any ations, or autif G—but do lis titute basis ace I, if the st cerning substi sign. Do not h a station ac streams mus ber the FCC I e, WRC is Ch he station whether the s atter "N" (for r oncommercia page (v) of the the local ser age (v) of the ese" in column on during the me basis bect	g period except 981, permitting t referring to 76.6 paragraph y distant station horizations: st it in space I (th ation was carried tute basis static report originatio coording to its ov t be reported in has assigned to hannel 4 in Wash tation is a network, "N-M" al educational), ue general instruct of, you must co accounting peri- ause of lack of eam that is not	(1) stations carrie he carriage of cer 51(e)(2) and (4))]; is carried by your he Special Staten ed both on a subst ons, see page (v) on program servic ver-the-air design column 1 (list eac the television stat hington, D.C. This ork station, an inc (for network multi or "E-M" (for non- uctions located in 'distant"), enter "Y tions located in th mplete column 5, iod. Indicate by ei activated channel subject to a royal	res <sup>™</sup> . If not, enter "No". For an ex ne paper SA3 form , stating the basis on which you ntering "LAC" if your cable syster	G Primary Transmitters: Television
For the retransmi	ssion of a distan	t multicast str	eam that is not	subject to a royal	ty payment because it is the subjec	
					ystem or an association representin ary transmitter, enter the designa	
tion "E" (exempt). Fo	r simulcasts, als	o enter "E". If	you carried the	channel on any o	other basis, enter "O." For a furthe	
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					th which the station is identifed	
Note: If you are utiliz	zing multiple cha	nnel line-ups,	use a separate	e space G for eacl		
	- 1	CHANN	EL LINE-UP	AE - PAGE 2		
1. CALL SIGN	2. B'CAST CHANNEL NUMBER	CHANN 3. TYPE OF STATION	4. DISTANT? (Yes or No)	AE - PAGE 2 5. BASIS OF CARRIAGE (If Distant)		
	CHANNEL	3. TYPE OF	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	·	
SIGN	CHANNEL NUMBER	3. TYPE OF STATION	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION	
SIGN WVIA-2	CHANNEL NUMBER 44.2	3. TYPE OF STATION <b>E-M</b>	4. DISTANT? (Yes or No)	5. BASIS OF CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS Kids)	
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FORM SA3E. PAG						
	OWNER OF CABLE SY				SYSTEM ID#	Name
SERVICE E	LECTRIC CABI	_EVISION,	INC.		6553	
PRIMARY TRANS	MITTERS: TELEVISI	ON				
carried by your ca FCC rules and re 76.59(d)(2) and ( substitute program	able system during gulations in effect o 4), 76.61(e)(2) and m basis, as explaine	the accountin on June 24, 19 (4), or 76.63 ( ed in the next	g period except 981, permitting t (referring to 76.0 paragraph	(1) stations carri the carriage of ce 61(e)(2) and (4))]	as and low power television stations) ed only on a part-time basis under rtain network programs [sections ; and (2) certain stations carried on a	G Primary Transmitters:
	ifc FCC rules, regul	-	-	is carried by your	cable system on a substitute program	Television
<ul> <li>Do not list the s station was ca</li> <li>List the station h basis. For furth in the paper S</li> </ul>	tation here in space irried only on a sub- here, and also in sp her information con- A3 form.	e G—but do lis stitute basis ace I, if the st cerning subst	st it in space I (t ation was carrie itute basis statio	ed both on a subs ons, see page (v)	nent and Program Log)—if the titute basis and also on some othe of the general instructions locatec res such as HBO, ESPN, etc. Identify	
each multicast sti	ream associated wit	th a station ac	cording to its o	ver-the-air design	ation. For example, report multi	
cast stream as "V WETA-simulcast)		streams mus	t be reported in	column 1 (list ea	ch stream separately; for example	
,		ber the FCC	has assigned to	the television sta	ation for broadcasting over-the-air ir	
on which your cal Column 3: Ind educational static (for independent For the meaning	ble system carried t dicate in each case on, by entering the l multicast), "E" (for r of these terms, see	he station whether the s etter "N" (for r noncommercia page (v) of th	station is a netw network), "N-M" al educational), ne general instru	ork station, an ind (for network mult or "E-M" (for non- uctions located in	s may be different from the channe dependent station, or a noncommercia icast), "I" (for independent), "I-M commercial educational multicast) the paper SA3 form	
	service area, see p			,.	∕es". If not, enter "No". For an ex ne paper SA3 form	
cable system carried the distan		on during the	accounting per ause of lack of	iod. Indicate by e activated channe		
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	VNER OF CABLE SY ECTRIC CABL		INC.		SYSTEM ID# 6553	Name
RIMARY TRANSMIT		,				
n General: In space carried by your cable FCC rules and regul: 76.59(d)(2) and (4), substitute program b Substitute Basis pasis under specifc I Do not list the station station was carrie List the station here basis. For further in the paper SA3 Column 1: List ea each multicast stream cast stream as "WET	e G, identify every e system during t ations in effect of 76.61(e)(2) and ( basis, as explained s <b>Stations:</b> With FCC rules, regula on here in space do only on a subs e, and also in spa information conc form. ach station's call m associated wit	y television st he accounting n June 24, 19 (4), or 76.63 ( ed in the next respect to any ations, or auth G—but do lis titute basis ace I, if the st cerning substi sign. Do not h a station ac	g period except 81, permitting t referring to 76.6 paragraph y distant station norizations: t it in space I (th ation was carrie tute basis static report originatic cording to its ov	(1) stations carrie he carriage of cer 51(e)(2) and (4))]; s carried by your he Special Staten ed both on a subs ons, see page (v) on program servic ver-the-air design	as and low power television stations) ed only on a part-time basis under tain network programs [section: and (2) certain stations carried on a cable system on a substitute program nent and Program Log)—if the titute basis and also on some othe of the general instructions locatec es such as HBO, ESPN, etc. Identify ation. For example, report multi ch stream separately; for example	G Primary Transmitter Television
ts community of lice on which your cable <b>Column 3:</b> Indica	nse. For example system carried th ate in each case v	e, WRC is Ch he station whether the s	annel 4 in Wasl tation is a netwo	hington, D.C. This ork station, an inc	tion for broadcasting over-the-air ir s may be different from the channe lependent station, or a noncommercia	
(for independent mul For the meaning of t	lticast), "E" (for n hese terms, see station is outside	oncommercia page (v) of th the local ser	l educational), e e general instru vice area, (i.e. "	or "E-M" (for none actions located in distant"), enter "Y	′es". If not, enter "No". For an ex	
tion "E" (exempt). Fo explanation of these <b>Column 6:</b> Give t	or simulcasts, also three categories the location of ea r Canadian static	o enter "E". If , see page (v ich station. Fo ons, if any, giv	you carried the ) of the general or U.S. stations, re the name of t	channel on any instructions local list the communi he community wi	ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form ty to which the station is licensed by the th which the station is identifed h channel line-up.	
		CHANN	EL LINE-UP	AF - PAGE 2		
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	
SIGN	CHANNEL	OF	(Yes or No)	CARRIAGE		
SIGN	CHANNEL NUMBER	OF STATION	(Yes or No)	CARRIAGE	6. LOCATION OF STATION	
SIGN WVIA WVIA-2	CHANNEL NUMBER 44	OF STATION E	(Yes or No)	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS)	
SIGN WVIA WVIA-2 WVIA-3	CHANNEL NUMBER 44 44.2	OF STATION E E-M	(Yes or No)	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS) SCRANTON, PA (PBS Kids)	
SIGN WVIA WVIA-2 WVIA-3 WBRE-2	CHANNEL NUMBER 44 44.2 44.3	OF STATION E E-M E-M	(Yes or No) NO NO	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS) SCRANTON, PA (PBS Kids) SCRANTON, PA (PBS Create)	
SIGN WVIA WVIA-2 WVIA-3 WBRE-2 WBRE-3	CHANNEL NUMBER 44 44.2 44.3 28.2	OF STATION E-M E-M I-M	(Yes or No) NO NO NO	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS) SCRANTON, PA (PBS Kids) SCRANTON, PA (PBS Create) WILKES BARRE, PA (LAFF)	
SIGN WVIA-2 WVIA-2 WVIA-3 WBRE-2 WBRE-3 WYOU-2	CHANNEL NUMBER 44 44.2 44.3 28.2 28.3	OF STATION E E-M E-M I-M I-M	(Yes or No) NO NO NO NO	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS) SCRANTON, PA (PBS Kids) SCRANTON, PA (PBS Create) WILKES BARRE, PA (LAFF) WILKES BARRE, PA (RewindTV)	
SIGN WVIA WVIA-2 WVIA-3 WBRE-2 WBRE-3 WYOU-2 WYOU-3	CHANNEL NUMBER 44 44.2 44.3 28.2 28.3 22.2	OF STATION E-M E-M I-M I-M	(Yes or No) NO NO NO NO NO	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS) SCRANTON, PA (PBS Kids) SCRANTON, PA (PBS Create) WILKES BARRE, PA (LAFF) WILKES BARRE, PA (RewindTV) SCRANTON, PA (Court TV)	
SIGN WVIA-2 WVIA-2 WVIA-3 WBRE-2 WBRE-3 WBRE-3 WYOU-2 WYOU-3 WYOU-4	CHANNEL NUMBER 44 44.2 44.3 28.2 28.3 28.3 22.2 22.3	OF STATION E-M E-M I-M I-M I-M I-M	(Yes or No) NO NO NO NO NO NO	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS) SCRANTON, PA (PBS Kids) SCRANTON, PA (PBS Create) WILKES BARRE, PA (LAFF) WILKES BARRE, PA (RewindTV) SCRANTON, PA (Court TV) SCRANTON, PA (Bounce)	
SIGN WVIA WVIA-2 WVIA-3 WBRE-2 WBRE-3 WYOU-2 WYOU-2 WYOU-3 WYOU-4 WBRE-4	CHANNEL NUMBER 44 44.2 44.3 28.2 28.3 28.3 22.2 22.3 22.3 22.4	OF STATION E-M E-M I-M I-M I-M I-M	(Yes or No) NO NO NO NO NO NO NO	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS) SCRANTON, PA (PBS Kids) SCRANTON, PA (PBS Create) WILKES BARRE, PA (LAFF) WILKES BARRE, PA (RewindTV) SCRANTON, PA (Court TV) SCRANTON, PA (Bounce) SCRANTON, PA (Cozi)	
SIGN WVIA WVIA-2 WVIA-3 WBRE-2 WBRE-3 WYOU-2 WYOU-2 WYOU-3 WYOU-3 WYOU-4 WBRE-4 WSWB-4	CHANNEL NUMBER 44 44.2 44.3 28.2 28.3 22.2 22.3 22.3 22.4 28.4	OF STATION E-M E-M I-M I-M I-M I-M I-M	(Yes or No) NO NO NO NO NO NO NO	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS) SCRANTON, PA (PBS Kids) SCRANTON, PA (PBS Create) WILKES BARRE, PA (LAFF) WILKES BARRE, PA (RewindTV) SCRANTON, PA (Court TV) SCRANTON, PA (Bounce) SCRANTON, PA (Cozi) WILKES BARRE, PA (True Crime)	
	CHANNEL NUMBER 44 44.2 44.3 28.2 28.3 22.2 22.3 22.4 22.4 28.4 38.4	OF STATION E-M E-M I-M I-M I-M I-M I-M I-M I-M	(Yes or No) NO NO NO NO NO NO NO NO	CARRIAGE	6. LOCATION OF STATION SCRANTON, PA (PBS) SCRANTON, PA (PBS Kids) SCRANTON, PA (PBS Create) WILKES BARRE, PA (LAFF) WILKES BARRE, PA (RewindTV) SCRANTON, PA (Court TV) SCRANTON, PA (Bounce) SCRANTON, PA (Cozi) WILKES BARRE, PA (True Crime) SCRANTON, PA (ASN)	

FORM SA3E. PAGE 3.						
LEGAL NAME OF OW	NER OF CABLE SY	STEM:			SYSTEM ID#	Name
SERVICE ELE	CTRIC CABL	EVISION,	INC.		6553	Naille
PRIMARY TRANSMITT	ERS: TELEVISIO	NC				
carried by your cable	system during t	he accountin	g period except	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under	G
J	6.61(e)(2) and	(4), or 76.63 (	referring to 76.6	•	rtain network programs [section: ; and (2) certain stations carried on a	Primary Transmitters:
Substitute Basis	Stations: With	respect to an	y distant station	s carried by your	cable system on a substitute program	Television
<ul> <li>basis under specifc F</li> <li>Do not list the statio</li> </ul>	-			he Special Stater	nent and Program Log)—if the	
station was carried • List the station here	l only on a subs , and also in spa	ititute basis ace I, if the st	ation was carrie	d both on a subs	titute basis and also on some othe	
in the paper SA3 f		cerning subst	tute basis static	ons, see page (v)	of the general instructions located	
Column 1: List ea	ch station's call	-			es such as HBO, ESPN, etc. Identify	
			-	-	nation. For example, report multi ch stream separately; for example	
WETA-simulcast).				``	ation for broadcasting over-the-air ir	
•	•		annel 4 in Wasl	hington, D.C. Thi	s may be different from the channe	
on which your cable s Column 3: Indicat			tation is a netwo	ork station, an ind	dependent station, or a noncommercia	
educational station, b	y entering the le	etter "N" (for r	etwork), "N-M"	(for network mult	icast), "I" (for independent), "I-M	
(for independent mult For the meaning of th	<i>.</i>		· · ·	•	commercial educational multicast) the paper SA3 form	
Column 4: If the s	tation is outside	the local ser	vice area, (i.e. "	ˈdistant"), enter "\	res". If not, enter "No". For an ex	
planation of local serv Column 5: If you h					he paper SA3 form , stating the basis on which you	
cable system carried	the distant stati	on during the	accounting peri	iod. Indicate by e	ntering "LAC" if your cable syster	
carried the distant sta	•					
					Ity payment because it is the subjec ystem or an association representin	
the cable system and	a primary trans	mitter or an a	ssociation repre	esenting the prim	ary transmitter, enter the designa	
· · /					other basis, enter "O." For a furthe ted in the paper SA3 form	
Column 6: Give th	ne location of ea	ch station. Fo	or U.S. stations,	list the commun	ity to which the station is licensed by the	
					ith which the station is identifed	
Note: If you are utilizi	ng multiple cha	•	•	·	n channel line-up.	
		CHANN	EL LINE-UP	AG		
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)		
WYOU	22	Ν	NO		SCRANTON, PA (CBS)	
WBRE	28	N	NO		WILKES BARRE, PA (NBC)	
WITF	33	E	NO		HARRISBURG, PA (PBS)	
WNEP	16	N	NO		SCRANTON, PA (ABC)	
WNEP-2	16.2	I-M	NO		SCRANTON, PA (Antenna)	
WPIX	11		YES	0	NEW YORK, NY (CW)	
	<b>11</b>	1		0		
WQMY	53		NO			
WQPX	64	I	NO		SCRANTON, PA (ION)	
WSWB	38	I	NO		SCRANTON, PA (CW)	
WSWB-2	38.2	I-M	NO		SCRANTON, PA (MeTV)	
WSWB-3	38.3	I-M	NO		SCRANTON, PA (Comet)	
WWOR	9	I	YES	0	NEW YORK, NY (MyTV)	
WOLF	56	I	NO		HAZLETON, PA (FOX)	
WVIA	44	Е	NO		SCRANTON, PA (PBS)	
WVIA-2	44.2	E-M	NO		SCRANTON, PA (PBS Kids)	
WVIA-2	44.2	i⊄-1¥I	NU	<u> </u>	JURANI UN, FA (FD3 MUS)	

FORM SA3E. PAGE						
	OWNER OF CABLE SY				SYSTEM ID#	Name
SERVICE EL	LECTRIC CABL	EVISION,	INC.		6553	
PRIMARY TRANSM	ITTERS: TELEVISI	ON				
carried by your cat FCC rules and reg 76.59(d)(2) and (4)	ble system during t julations in effect o ), 76.61(e)(2) and	the accountin on June 24, 19 (4), or 76.63 (	g period except 981, permitting t referring to 76.0	(1) stations carrie	ns and low power television stations) ed only on a part-time basis under rtain network programs [sections ; and (2) certain stations carried on a	<b>G</b> Primary
Substitute Bas		respect to an	y distant station	is carried by your	cable system on a substitute program	Transmitters: Television
station was car	ation here in space ried only on a subs	e G—but do lis stitute basis	st it in space I (t		nent and Program Log)—if the titute basis and also on some othe	
basis. For furthe in the paper SA <b>Column 1:</b> List	er information con 3 form. each station's call	cerning substi I sign. Do not	itute basis statio	ons, see page (v) on program servic	of the general instructions located es such as HBO, ESPN, etc. Identify	
					ation. For example, report multi	
cast stream as "Wi WETA-simulcast).		streams mus	t be reported in	column 1 (list ea	ch stream separately; for exampl∈	
Column 2: Give	e the channel num		-		ation for broadcasting over-the-air ir	
on which your cabl	le system carried t	he station		0	s may be different from the channe dependent station, or a noncommercia	
		,	,	•	icast), "I" (for independent), "I-M	
For the meaning of	f these terms, see	page (v) of th	e general instru	uctions located in	commercial educational multicast) the paper SA3 form ⁄es". If not, enter "No". For an ex	
planation of local s	service area, see p	age (v) of the	general instruc	tions located in th	ne paper SA3 form	
					, stating the basis on which you ntering "LAC" if your cable syster	
carried the distant	station on a part-ti	ime basis bec	ause of lack of	activated channe	I capacity	
					ty payment because it is the subject	
	HELL EULERED INTO C	or neiore li	uue ou zuug b	enveen a cable s		
the cable system a					ystem or an association representin ary transmitter, enter the designa	
tion "E" (exempt). I	and a primary trans For simulcasts, als	smitter or an a so enter "E". If	ssociation repr you carried the	esenting the prim channel on any	ary transmitter, enter the designa other basis, enter "O." For a furthe	
tion "E" (exempt). I explanation of thes	and a primary trans For simulcasts, als se three categories	smitter or an a so enter "E". If s, see page (v	association repr you carried the ) of the general	esenting the prim channel on any instructions loca	ary transmitter, enter the designa other basis, enter "O." For a furthe ted in the paper SA3 form	
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Name	LEGAL NAME OF (							SYSTEM ID# 6553			
H Primary Transmitters: Radio	SERVICE ELECTRIC CABLEVISION, INC.       64         PRIMARY TRANSMITTERS: RADIO       In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period.         Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, 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).										
			0/5				0/5				
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION			
							·				
							·				
							·				
							·				

FORM SA3E. PAGE 5.						A	CCOUNTING	PERIOD: 2021/2
LEGAL NAME OF OWNER OF						SYS	STEM ID# 6553	Name
SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LC	G				
In General: In space I, ident substitute basis during the ac explanation of the programm form.	ccounting pe	eriod, under spe	ecific present and former FC	C rules, regu	lations, or authoriz	ations. Fo	or a further	Substitute
1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE					Carriage:
<ul> <li>During the accounting per broadcast by a distant star</li> </ul>	riod, did yo			isis, any non		n program <b>/es X</b>	_	Special Statement and Program Log
<b>Note:</b> If your answer is "No log in block 2.	", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you	must complete the	e progran	n	
2. LOG OF SUBSTITUTI In General: List each subsidiar. If you need more space Column 1: Give the title period, was broadcast by a under certain FCC rules, re SA3 form for futher informat titles, for example, "I Love Column 2: If the program Column 3: Give the call Column 4: Give the bro the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 gi Column 6: State the time to the nearest five minutes stated as "6:00–6:30 p.m."	titute progr ace, please of every no distant sta egulations, i ation. Do no Lucy" or "N m was broa sign of the adcast stati nadian stati nath and day ve "5/7." we when th . Example: ter "R" if the and regulat rogramming	am on a separ attach additio connetwork tele tion and that y or authorizatio ot use general BA Basketball adcast live, ent station broadd ion's location ( ons, if any, the y when your sy e substitute pr a program car e listed program ions in effect of	nal pages. vision program (substitute our cable system substitu ns. See page (vi) of the ge categories like "movies", : 76ers vs. Bulls." er "Yes." Otherwise enter casting the substitute prog the community to which the community with which the stem carried the substitute rogram was carried by you ried by a system from 6:0° m was substituted for prog during the accounting period	program) th ted for the pr eneral instruc- or "basketbal "No." ram. e station is li e station is li e station is li e program. U r cable syste I:15 p.m. to 6 ramming tha od; enter the	at, during the according ogramming of and stions located in the lift. List specific pro- dentified). Ise numerals, with sem. List the times 5:28:30 p.m. shou t your system was letter "P" if the list	ounting other stati ne paper rogram CC or, in n the mon accuratel Id be s required red pro	tion hth ly	
s	UBSTITUT	E PROGRAM	1		EN SUBSTITUTE	7	7. REASON	
1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM —		FOR DELETION	
					_			
					_			
					_			
					_			
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					_			

	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM SYSTEM										TEM ID#
Name	SERVICE EL	ECTRIC CA	BLEVISION	, INC.							6553
.1		s space ties in									
J Part-Time Carriage Log	In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part- time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages. Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G. Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage oc- curred during the accounting period.										
	<ul> <li>Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10."</li> <li>State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.– 3:15 a.m. app."</li> <li>You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.– 12:00 p.m."</li> </ul>										
			DA	TES AND F	HOURS O	F P	ART-TIME CAR	RIAGE			
	CALL SIGN	WHEN	I CARRIAGE C		1		CALL SIGN	WHEN	CARRIAGE O	CCURRE	ED
	ON LEE ONOT	DATE	FROM	IOURS	то		O, LE CICIL	DATE	H FROM	OURS	то
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FORM	SA3E. PAGE 7.				•			
LEGA	L NAME OF OWNER OF CABLE SYSTEM:			SYSTEM ID#	Namo			
SE	RVICE ELECTRIC CABLEVISION, INC.			6553	itanio			
GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions.         Gross receipts from subscribers for secondary transmission service(s)         during the accounting period.         IMPORTANT: You must complete a statement in space P concerning gross receipts.								
<ul> <li>Instru</li> <li>Con</li> <li>Con</li> <li>If yo feet</li> <li>If yo</li> </ul>	<ul> <li>COPYRIGHT ROYALTY FEE</li> <li>Instructions: Use the blocks in this space L to determine the royalty fee you owe:</li> <li>Complete block 1, showing your minimum fee.</li> <li>Complete block 2, showing whether your system carried any distant television stations.</li> <li>If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.</li> <li>If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.</li> </ul>							
	rt 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should b k 3 below.	e enter	red on l	ine 1 of				
If particular between the second	rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be low.	entered	d on line	e 2 in block				
	rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount sho block 4 below.	ould be	entered	d on line				
	<b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or mor least the minimum fee, regardless of whether they carried any distant stations. This fe system's gross receipts for the accounting period.							
	Line 1. Enter the amount of gross receipts from space K \$ 5,105,657.55							
	Line 2. Multiply the amount in line 1 by 0.01064 Enter the result here.							
	This is your minimum fee.	\$		54,324.20				
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the space G. If, in space G, you identifed any stations as "distant" by stating "Yes" in colur "Yes" in this block. • Did your cable system carry any distant television stations during the accounting per X Yes—Complete the DSE schedule.	mn 4, y	ou mus	t check				
Block	Line 1. <b>BASE RATE FEE:</b> Enter the base rate fee from either part 8, section 3 or 4, or part 9, block A of the DSE schedule. If none, enter zero		\$	96,364.78				
3	Line 2. <b>3.75 Fee:</b> 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	\$		96,364.78				
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		\$	96,364.78	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 appropriate			
	TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.         Add Lines 1, 2 and 3 of block 4 and enter total here         \$ 97,089.78							
	Remit this amount via <i>electronic payment</i> payable to Register of Copyrights. general instructions located in the paper SA3 form for more information.)	(See pa	age (i) c	f the	additional fees.			

ACCOUNTING PERI	DD: 2021/2							A3E. PAGE 8.			
Name							S	YSTEM ID#			
	SERVICE ELECTRIC C	CABLEN	VISION, INC.					6553			
	CHANNELS										
Μ	<b>Instructions:</b> 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	to its subscribers and (2) i	the cabl	le system's total nur	mber of activated ch	anneis, durii	ng the accounting perio	d.				
	1. Enter the total number	of chan	nels on which the ca	able			26				
	system carried televisior	on broado	cast stations								
	2. Enter the total number	of active	ated channels								
	on which the cable syste			cast stations			86				
	and nonbroadcast servic	ices									
N	INDIVIDUAL TO BE CON we can contact about this			FORMATION IS NE	EDED: (Ider	ntify an individual					
Individual to Be Contacted											
for Further Information	Name <b>Robert M. V</b>	Wiean	ld			Teleph	none 610-432-2210				
	Address 4949 Libert	<b>'ty Lan</b> rural route	<b>ie, Suite 400</b> a, apartment, or suite nur	mber)							
	Allentown,										
	(City, town, state,	, zip)									
	Email rob	bert.wi	eand@secv.cor	n		Fax (optional)					
	CERTIFICATION (This stat	atement o	of account must be o	certifed and signed i	n accordanc	ce with Copyright Office	regulations.)				
O Certifcation	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)										
							_				
	(Owner other than cor	rporation	n or partnership) I a	m the owner of the ca	able system a	as identifed in line 1 of sp	bace B; or				
			prporation or partner t the owner is not a co			gent of the owner of the c	able system as identified				
	(Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.										
	I have examined the states are true, complete, and cor [18 U.S.C., Section 1001(1)]	rrect to th					tained herein				
		X /	s/ Mark D. Walter								
						l re to certify this statement s/ signature, place your cu	t. Irsor in the box and press the "I	F2"			
	butte	ton, then	type /s/ and your nam	ne. Pressing the "F" t	outton will ave	oid enabling Excel's Lotus	compatibility settings.				
	Тур	ped or p	printed name: Mar	rk D. Walter							
	Title		enior Vice Pres	ident							
	1106		itle of official position he		ership)						
	Date	ite: Fel	bruary 14, 2022								
	1										
	: Section 111 of title 17 of the L cess your statement of account										

numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in t completed record of statements of account, and it may affect the legal sufficiency of the fing, a determination that would be made by a court of lay

FORM	SA3E	PAGE9

LEGAL NAME OF OWNER OF SERVICE ELECTRI	CABLE SYSTEM: SYST C CABLEVISION, INC.	FEM ID# 6553 <sup>Name</sup>
The Satellite Home V lowing sentence: "In determining service of prov	<b>MENT CONCERNING GROSS RECEIPTS EXCLUSIONS</b> Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- g the total number of subscribers and the gross amounts paid to the cable system for the basic viding secondary transmissions of primary broadcast transmitters, the system shall not include sub- amounts collected from subscribers receiving secondary transmissions pursuant to section 119."	P Special Statement
paper SA3 form. During the accounting	on when to exclude these amounts, see the note on page (vii) of the general instructions in the g period did the cable system exclude any amounts of gross receipts for secondary transmissions	Concerning Gross Receipts Exclusion
	riers to satellite dish owners?	
X NO		
YES. Enter the to	otal here and list the satellite carrier(s) below	
Name	Name	
Mailing Address	Mailing Address	
INTEREST ASSE	SSMENTS	
•	nis worksheet for those royalty payments submitted as a result of a late payment or underpayment. interest assessment, see page (viii) of the general instructions in the paper SA3 form.	Q
Line 1 Enter the am	ount of late payment or underpayment	Interest
		Assessment
	x	
Line 2 Multiply line 1	1 by the interest rate* and enter the sum here	-
	x	days
Line 3 Multiply line 2	2 by the number of days late and enter the sum here	-
	x 0.00274	
Line 4 Multiply line 3	3 by 0.00274** enter here and on line 3, block 4,	
spac	Se L, (page 7)	-
	(interest charge)	
	rest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please ensing Division at (202) 707-8150 or licensing@loc.gov.	
	mal equivalent of 1/365, which is the interest assessment for one day late.	
	g this worksheet covering a statement of account already submitted to the Copyright Offce, owner, address, first community served, accounting period, and ID number as given in the original	
Owner		
Address		
<b>—</b>		
First community serve Accounting period		
ID number		
Privacy Act Notice: Section 1	11 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) re-	equested on th

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

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

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

### FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

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

**Step 2:** Calculate the station's basis of carriage value: The DSE of a station also depends on its basis of carriage. If, as shown in space 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 is partice 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 anc "P" in column 7 of space I.)

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

#### TOTAL OF DSEs

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

#### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee anc 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, ir whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981

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

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following: 1) A station actually carried within any portion of a cable system prior

to June 25, 1981, pursuant to the former FCC rules. 2) A station first carried after June 24, 1981, which could have beer

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, noncommercial 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 Syndicatec Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

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

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

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

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

## DSE SCHEDULE. PAGE 11.

### COMPUTING THE BASE RATE FEE-PART 8 OF THE DSE SCHEDULE

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

· If none of the stations were partially distant, calculate your base rate fee according to the following rates-for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable. First DSF 1.064% of gross receipts Each of the second, third, and fourth DSEs 0.701% of gross receipts

The fifth and each additional DSE

0.330% of gross receipts

PARTIALLY DISTANT STATIONS-PART 9 OF THE DSE SCHEDULE

· If any of the stations were partially distant:

1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.

2. Identify the communities/areas represented by each subscriber group. 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

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

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

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

Calculate a separate base rate fee for each subscriber group, using (1) 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

-	Distant Stations Carried		Identification (	of Subscriber Gr	oups		
rrent FCC	STATION	DSE	CITY	OUTSIDE LOC	,AL	GRC	OSS RECEIPTS
uld be within	A (independent)	1.0		SERVICE ARE	A OF	FROM S	SUBSCRIBERS
oth stations	B (independent)	1.0	Santa Rosa	Stations A, B, C	), D ,E		\$310,000.00
City and Bo-	C (part-time)	0.083	Rapid City	Stations A and	С		100,000.00
n the local	D (part-time)	0.139	Bodega Bay	Stations A and	С		70,000.00
3, D, and E.	E (network)	<u>0.25</u>	Fairvale	Stations B, D, a	and E		120,000.00
	TOTAL DSEs	2.472		TOTAL GROS	S RECEIPTS		\$600,000.00
1	Minimum Fee Total Gross	Receipts		\$600,000.00			
A and C		•		x .01064			
e zone				\$6,384.00			
	First Subscriber Group		Second Subsc	riber Group		Third Subscriber Group	
_ / `	(Santa Rosa)		(Rapid City and	l Bodega Bay)		(Fairvale)	
Fairvale	· ·		· · ·				
Falivaie	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 .010 <sup>r</sup>	/64 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 .007	01 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: \$6,4						
	uld be within oth stations City and Bo- n the local B, D, and E. A and C e zone Fairvale	rrent FCC STATION uld be within oth stations B (independent) City and Bo- n the local D (part-time) B, D, and E. E (network) <b>TOTAL DSES</b> Minimum Fee Total Gross I First Subscriber Group (Santa Rosa) Gross receipts DSEs Base rate fee \$310,000 x .01064 x 1.0 = \$310,000 x .00701 x 1.472 =	rrent FCCSTATIONDSEuld be within oth stationsA (independent)1.0DistributionB (independent)1.0C (part-time)0.083D (part-time)0.139B (independent)1.0C (part-time)0.139B (independent)0.139C (part-time)0.25TOTAL DSEs2.472Minimum Fee Total Gross ReceiptsA and Ce zoneFairvaleGross receipts\$310,000.00DSEs2.472Base rate fee\$6,497.20\$310,000 x .01064 x 1.0 =3,298.40\$310,000 x .00701 x 1.472 =3,198.80	rrent FCC STATION DSE CITY uld be within oth stations B (independent) 1.0 Santa Rosa C (part-time) 0.083 Rapid City n the local D (part-time) 0.139 Bodega Bay B, D, and E. E (network) 0.25 Fairvale TOTAL DSEs 2.472 Minimum Fee Total Gross Receipts A and C e zone First Subscriber Group (Santa Rosa) First Subscriber Group (Santa Rosa) Gross receipts \$310,000.00 DSEs 2.472 Base rate fee \$6,497.20 Base rate fee \$6,497.20 \$310,000 x .01064 x 1.0 = 3,298.40 \$170,000 x .0070 t x 1.472 = 3,198.80 \$170,000 x .0071 x 1.472 = 3,198.80	rrent FCC uld be within oth stationsSTATIONDSECITYOUTSIDE LOC. SERVICE ARE/ OUTSIDE LOC.uld be within oth stationsA (independent)1.0Santa RosaStations A, B, CCity and Bo- n the local B, D, and E.C (part-time)0.083Rapid CityStations A and CA, D, and E.E (network)0.25FairvaleStations B, D, aA and C e zoneTOTAL DSEs2.472TOTAL GROSSA and C e zoneFirst Subscriber Group (Santa Rosa)Second Subscriber Group (Rapid City and Bodega Bay)FairvaleGross receipts\$310,000.00 (Rapid City and Bodega Bay)Gross receipts\$310,000.00 (Santa Rosa)Gross receiptsGross receipts a y\$310,000 x.01064 x 1.0 = \$310,000 x.01064 x 1.0 = \$310,000 x.00701 x 1.472 =Second Subscriber Group (Santa 8.00 x.00701 x 0.483 =	rrent FCC uld be within oth stations City and Bo- n the local 8, D, and E.STATION (independent)DSE 1.0CITY OUTSIDE LOCAL SERVICE AREA OF Bodega Bay Bodega Bay Stations A, B, C, D, EA and C e zoneCopart-time)0.083 (Dipart-time)Rapid City 0.25Stations A, and C Stations B, D, and E TOTAL DSEsA and C e zoneFirst Subscriber Group (Santa Rosa)Second Subscriber Group (Rapid City and Bodega Bay)Stations B, D, and E TOTAL GROSS RECEIPTSA and C e zoneFirst Subscriber Group (Santa Rosa)Second Subscriber Group (Rapid City and Bodega Bay)FairvaleGross receipts \$310,000.00 DSEs\$310,000.00 DSEsSecond Subscriber Group (Rapid City and Bodega Bay)a ySinta Rosa)Gross receipts \$170,000.00 DSEs\$170,000.00 DSEsa ySinta Rosa)Second Subscriber Group (Rapid City and Bodega Bay)a ySinta Rosa)Sinta RosaGross receipts \$310,000 x.01064 x 1.0 = \$310,000 x.00701 x 1.472 = \$310,000 x.00701 x 1.472 = \$319,880Sinto,000 x.00701 x .083 = \$170,000 x.00701 x .083 = \$170,000 x.00701 x .083 =	rrrent FCC STATION DSE CITY OUTSIDE LOCAL GRO A (independent) 1.0 SERVICE AREA OF FROM S B (independent) 1.0 Santa Rosa Stations A, B, C, D, E C (part-time) 0.083 Rapid City Stations A and C D (part-time) 0.139 Bodega Bay Stations A and C D (part-time) 0.139 Bodega Bay Stations A and C E (network) 0.25 Fairvale Stations B, D, and E TOTAL DSES 2.472 TOTAL GROSS RECEIPTS Minimum Fee Total Gross Receipts \$600,000.00 X .01064 \$6,384.00 First Subscriber Group (Santa Rosa) Gross receipts \$310,000.00 DSEs 2.4722 Gross receipts \$310,000.00 DSEs 2.472 Base rate fee \$6,497.20 Base rate fee \$6,497.20 Base rate fee \$1,907.71 Base rate fee \$310,000 x .01064 x 1.0 = 3,298.40 \$10,000 x .00701 x 1.472 = 3,198.80 \$10,000 x .00701 x 1.472 = 3,198.80

In this example, the cable system would enter \$10,008.94 in space L, block 3, line 1 (page 7)

35 mile zone

## DSE SCHEDULE. PAGE 11. (CONTINUED)

DOE CONEDUCE. I AO	E 11. (CONTINUED)				61	STEM ID
1	LEGAL NAME OF OWNER OF CABLE				5	
	SERVICE ELECTRIC CA					6553
	SUM OF DSEs OF CATEGOR		NS:			
	Add the DSEs of each station				2 50	
	Enter the sum here and in line	1 of part 5 of this	s schedule.		3.50	
0	Instructions:					
2	In the column headed "Call S	Sign": list the cal	Il signs of all distant stations	identified by	the letter "O" in column 5	
Computation	of space G (page 3). In the column headed "DSE"	for each inden	andent station, give the DSF	- 26 "1 ()"· for	each network or noncom-	
of DSEs for	mercial educational station, giv			_ as 1.0, 101	each network of noncom-	
Category "O"	·····, g··		CATEGORY "O" STATION	IS: DSEs		
Stations	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE
	WPIX	1.000				
	WWOR	1.000				
	WVIA	0.250				
	WPVI	0.250				
	WCAU	0.250				
Add rows as	WITF	0.250				
necessary.						
Remember to copy	WVIA-2	0.250				
all formula into new	WVIA-3	0.250				
ows.						
				<b>B</b>		
				I		

								ULE. PAGE 12
Name							S	SYSTEM ID#
	SERVICE EL		UN, INC.					6553
<b>3</b> Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Column 2 figure should Column 2 be carried ou Column 9 give the type- Column 9	st the call sign of all dista 2: For each station, give t correspond with the infor 3: For each station, give t 4: Divide the figure in colu t at least to the third decin 5: For each independent 4: value as ".25." 5: Multiply the figure in co point. This is the station's	he number of I mation given in he total number umn 2 by the fi mal point. This station, give th station, give th sumn 4 by the s DSE. (For me CATEGORY	hours your cable syste n space J. Calculate o er of hours that the sta gure in column 3, and is the "basis of carriag e "type-value" as "1.0. figure in column 5, and	m carried the sta nly one DSE for of tion broadcast ov give the result in ge value" for the s " For each netwo d give the result i nding, see page (	ver the air during the account each station. ver the air during the ac decimals in column 4. station. vrk or noncommercial ec n column 6. Round to n (viii) of the general instru- ION OF DSEs	counting period. This figure must lucational station, o less than the uctions in the paper	SE
	SIGN	OF HOL CARRIE SYSTE	D BY	OF HOURS STATION ON AIR	CARRIÃO VALUE	GE VAL	JE	
			÷		=	x	=	
			÷		=	x	=	
			÷		-			
			÷ ÷		-	×		
			÷		=	x x	=	
			÷		=	x	=	
			÷		=	x	=	
<b>4</b> Computation of DSEs for Substitute- Basis Stations	<ul> <li>Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station:</li> <li>Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulartions in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and</li> <li>Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I).</li> <li>Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I.</li> <li>Column 3: Enter the number of days in the calendar year: 365, except in a leap year.</li> <li>Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).</li> </ul>							
		SU	IBSTITUTE	BASIS STATION	IS: COMPUTA	ATION OF DSEs		1
	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBI OF DAY IN YEAI	/S	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
				=			*	
				2			÷	=
		-	•	=			÷	=
		-	• •	=			÷	=
	Add the DSEs	s OF SUBSTITUTE-BAS of each station. um here and in line 3 of p			·	0.0	00	
5		ER OF DSEs: Give the am s applicable to your syster		boxes in parts 2, 3, and	d 4 of this schedul	e and add them to provid	e the total	
Total Number	1. Number o	of DSEs from part 2 ●				►	3.50	
of DSEs	2. Number o	of DSEs from part 3 ●				•	0.00	
	3. Number o	of DSEs from part 4 ●				►	0.00	
	TOTAL NUMBE	ER OF DSEs					►	3.50

DSE SCHEDULE. P	'AGE 13.							ACCOUNTIN	G PERIOD: 2021/2		
LEGAL NAME OF C	WNER OF CABLE	SYSTEM:					S	YSTEM ID#			
SERVICE ELE	CTRIC CABLE	VISION, I	NC.					6553	Name		
Instructions: Bloo In block A:											
<ul> <li>If your answer if schedule.</li> </ul>	"Yes," leave the re	emainder of p	part 6 and part	t 7 of the DSE sche	edule blank an	d complete pa	art 8, (page 16) of	the	6		
<ul> <li>If your answer if</li> </ul>	"No," complete blo	ocks B and C	below.								
BLOCK A: TELEVISION MARKETS											
Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981?											
Yes—Com	plete part 8 of the	schedule—	DO NOT COM	IPLETE THE REMA	AINDER OF P	ART 6 AND 7	<i>'</i> .				
X No—Comp	olete blocks B and	C below.									
		BLO	CK B: CARP	RIAGE OF PERM	MITTED DS	Es					
Column 1: CALL SIGN	under FCC rules	and regulati ne DSE Sche	ions prior to Ju edule. (Note: T	n part 2, 3, and 4 of ine 25, 1981. For fu he letter M below r h Act of 2010.)	urther explana	tion of permit	ted stations, see th	he			
Column 2: BASIS OF PERMITTED CARRIAGE	(Note the FCC ru A Stations carrie 76.61(b)(c)]	ules and regu ied pursuant	ulations cited b to the FCC ma	asis on which you o below pertain to tho arket quota rules [7 76.59(d)(1), 76.61(	ose in effect or 76.57, 76.59(b)	n June 24, 198 ), 76.61(b)(c),	76.63(a) referring	ı to			
	<ul> <li>B Specialty station as defined in 76.5(kk) (76.59(d)(1), 76.61(e)(1), 76.63(a) referring to 76.61(e)(1)</li> <li>C Noncommerical educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)]</li> <li>D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule).</li> <li>E Carried pursuant to individual waiver of FCC rules (76.7)</li> <li>*F A station previously carried on a part-time or substitute basis prior to June 25, 1981</li> <li>G Commercial UHF station within grade-B contour, [76.59(d)(5), 76.61(e)(5), 76.63(a) referring to 76.61(e)(5)]</li> <li>M Retransmission of a distant multicast stream.</li> </ul>										
Column 3:		e stations ide	entified by the	n parts 2, 3, and 4 letter "F" in column			worksheet on page	e 14 of			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE			
WWOR	D	1.00	WVIA-2	М	0.25						
WPIX	D	1.00	WVIA-3	М	0.25						
WITF	С	0.25									
	D	0.25									
WCAU WVIA	D C	0.25 0.25									
		0.23									
								3.50	-		
		E	BLOCK C: CC	OMPUTATION OF	F 3.75 FEE				-		
Line 1: Enter the	total number of	DSEs from	ı part 5 of this	schedule							
Line 2: Enter the	sum of permitte	d DSEs fro	m block B ab	ove							
				er of DSEs subjec t 7 of this schedu		rate.					
Line 4: Enter gro	ess receipts from	⊧space K (p	bage 7)				x 0.03	375	Do any of the DSEs represent partially		
Line 5: Multiply li	ine 4 by 0.0375 a	and enter s	um here				x		permited/ partially nonpermitted		
Line 6: Enter tota	al number of DS	Es from line	e 3				····		carriage? If yes, see part 9 instructions.		
Line 7: Multiply li	ine 6 by line 5 ar	nd enter he	re and on line	e 2, block 3, spac	e L (page 7)			0.00			

	OWNER OF CABLI		NC.				5	STEM ID# 6553	
		BLOCK	A: TELEVI	SION MARKET	S (CONTIN	UED)			
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	6
									Computati
									3.75 Fe

						DSE SCHEDULE. PAGE 14.				
Name	LEGAL NAME OF OWN					SYSTEM ID#				
Nume	SERVICE ELEC		SION, INC.			6553				
Worksheet for Computating the DSE Schedule for Permitted Part-Time and Substitute Carriage	stations carried pric Column 1: List the of Column 2: Indicate Column 3: Indicate Column 4: Indicate (Note that the Fo A—Part-time sp 76.59 B—Late-night pr 76.61 S—Substitute ca gener Column 5: Indicate Column 6: Compar in block	or to June 25, 1981, call sign for each dis the DSE for this stat the accounting perio the basis of carriage CC rules and regulat ecialty programming (d)(1),76.61(e)(1), or rogramming: Carriage (e)(3)). arriage under certain rail instructions in the the station's DSE fo e the DSE figures lis (B, column 3 of part	r the current accounting per ted in columns 2 and 5 and 6 for this station. in columns 2, 3, and 4 mus	verning part-time and sub letter "F" in column 2 of p period, occurring betweer riage and DSE occurred arried by listing one of the those in effect on June 24 asis, of specialty program )(1)). s 76.59(d)(3), 76.61(e)(3) authorizations. For furthe riod as computed in parts list the smaller of the two	stitute carriage.) bart 6 of the DSE schedul in January 1, 1978 and Ju (e.g., 1981/1). e following letters: 4, 1981.) imming under FCC rules, s a, or 76.63 (referring to r explanation, see page ( 2, 3, and 4 of this schedu o figures here. This figure	e. ine 30, 1981. ections vi) of the ule. should be entered				
		PERMITTED DS	E FOR STATIONS CARRI	ED ON A PART-TIME AN	D SUBSTITUTE BASIS					
	1. CALL	2. PRIOR	3. ACCOUNTING	4. BASIS OF	5. PRESENT	6. PERMITTED				
	SIGN	DSE	PERIOD	CARRIAGE	DSE	DSE				
		•								
7	Instructions: Block A	A must be completed								
-	In block A:	<i></i>								
Computation of the	If your answer is "Yes," complete blocks B and C, below. If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule.									
Syndicated	BLOCK A: MAJOR TELEVISION MARKET									
Exclusivity			BLUCK A. MAJUR	IELEVISION WARK						
Surcharge	<ul> <li>Is any portion of the of</li> </ul>	cable system within a	top 100 major television mar	ket as defned by section 7	6.5 of FCC rules in effect .	June 24, 1981?				
	X Yes—Complete	blocks B and C		No—Proceed to	part 8					
	BLOCK B: C	arriage of VHF/Grad	e B Contour Stations	BLOCH	K C: Computation of Exe	mpt DSEs				
	Is any station listed in	block B of part 6 the	e primary stream of a	Was any station listed	l in block B of part 7 carri	ed in any commu-				
			de B contour, in whole		ble system prior to March	31, 1972? (refer				
	or in part, over the ca	-	propriate permitted DSE	to former FCC rule 76	,					
		and proceed to part 8.		X No—Enter zero a	tation below with its appropr					
		and proceed to part of								
	CALL SIGN	DSE C	ALL SIGN DSE	CALL SIGN	DSE CALL S	IGN DSE				
		••••••••••••••••••••••••••••••••••••••								
		тс	DTAL DSEs 0.00	. ∥ └────	TOTAL D	DSEs 0.00				
					L					

DSE SCHEDULE. P.	AGE15.
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LEGAL NA		SYSTEM ID#	Name
	SERVICE ELECTRIC CABLEVISION, INC.	6553	
	BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE		
Section 1	Enter the amount of gross receipts from space K (page 7)	5,105,657.55	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?          X       Yes—Complete part 9 of this schedule.         No—Complete the applicable section below.		
	If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the D is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.	SE	
	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		
<u> </u>	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 D is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below. A. Enter 0.00300 of gross receipts (the amount in section 1)	SE	
	B. Enter 0.00189 of gross receipts (the amount in section 1)		
	C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2) and enter here		
	D. Multiply line B by line C and enter here		
	E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge		

### ACCOUNTING PERIOD: 2021/2

		DSE SCHEDULE. PAGE 16.
Name		I/E OF OWNER OF CABLE SYSTEM: SYSTEM ID# SERVICE ELECTRIC CABLEVISION, INC. 6553
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
<b>8</b> Computation of Base Rate Fee	6 was • In blo • If you • If you blank What i were lo	ust complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part checked "Yes," use the total number of DSEs from part 5. ick A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank. ir answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below
		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?
		X       Yes—Complete part 9 of this schedule.         No—Complete the following sections.
		BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE
	Section 1	Enter the amount of gross receipts from space K (page 7)
	Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.)
	Section 3	If the figure in section 2 is <b>4.000 or less,</b> compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below.
		A. Enter 0.01064 of gross receipts (the amount in section 1)
		B. Enter 0.00701 of gross receipts (the amount in section 1)
		C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here
		D. Multiply line B by line C and enter here
		E. Add lines A, and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee

LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	
SERVICE ELECTRIC CABLEVISION, INC.	6553	Name
Section If the figure in section 2 is more than 4.000, compute your base rate fee here and leave section 3 b	lank	
4		8
A. Enter 0.01064 of gross receipts		0
(the amount in section 1)►\$		
B. Enter 0.00701 of gross receipts		Computation
(the amount in section 1) ▶ \$		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. Carria		
shall instead be reported on a community-by-community basis (subscriber groups) if the cable sys ups in Space G.	stem reported multiple channel line-	9
In General: If any of the stations you carried were partially distant, the statute allows you, in comp	outing your base rate fee, to exclude	Computation
receipts from subscribers located within the station's local service area, from your system's total g this exclusion, you must:	ross receipts. To take advantage of	of
		Base Rate Fee and
First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subs station or the same group of stations. Next: Treat each subscriber group as if it were a separate c		Syndicated
DSEs and the portion of your system's gross receipts attributable to that group, and calculate a se		Exclusivity Surcharge
Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate	fee for your system.	for
NOTE: If any portion of your cable system is located within the top 100 television market and the s must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, co		Partially Distant
However, if your cable system is wholly located outside all major television markets, complete blo		Stations, and
How to Identify a Subscriber Group for Partially Distant Stations		for Partially Permitted
Step 1: For each community served, determine the local service area of each wholly distant and e	each partially distant station you	Stations
carried to that community.		
Step 2: For each wholly distant and each partially distant station you carried, determine which of y outside the station's local service area. A subscriber located outside the local service area of a sta		
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 subscriber group must consist entirely of subscribers who are distant to exactly the same compler	-	
system will have only one subscriber group when the distant stations it carried have local service		
Computing the base rate fee for each subscriber group: Block A contains separate sections, o	one for each of your system's	
subscriber groups.		
In each section: • Identify the communities/areas represented by each subscriber group.		
<ul> <li>Give the call sign for each of the stations in the subscriber group's complement—that is, each st</li> </ul>	ation that is distant to all of the	
subscribers in the group.		
• If:		
<ol> <li>your system is located wholly outside all major and smaller television markets, give each station and 4 of this schedule; or,</li> </ol>	n's DSE as you gave it in parts 2, 3,	
<ul><li>2) any portion of your system is located in a major or smaller televison market, give each station's part 6 of this schedule.</li></ul>	DSE as you 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 p in the paper SA3 form.	age (vii) of the general instructions	
• Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 page. In making this computation, use the DSE and gross receipts figure applicable to the particu DSEs for that group's complement of stations and total gross receipts from the subscribers in that your actual calculations on the form.	lar subscriber group (that is, the total	

Namo	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYS	ТЕМ
Name	SERVICE ELECTRIC CABLEVISION, INC.	6
	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.	

							6553	
B		COMPUTATION O SUBSCRIBER GRO		ATE FEES FOR EA			פוור	
OMMUNITY/ AREA				SECOND SUBSCRIBER GROUP       COMMUNITY/ AREA       Sub Group 2				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
VWOR	1.00			WWOR	1.00			
VPIX	1.00			WPIX	1.00			
				WVIA	0.25			
				WVIA-2	0.25			
				WVIA-3	0.25			
						-		
						-		
						-		
						-		
						-		
otal DSEs			2.00	Total DSEs			2.75	
ross Receipts First G	iroup	\$ 1,41	5,792.36	Gross Receipts Se	cond Group	\$	54,511.92	
ase Rate Fee First G	iroup	\$ 24	4,988.74	Base Rate Fee Se	cond Group	\$	1,248.73	
	THIRD	SUBSCRIBER GRO	UP		FOURTH	SUBSCRIBER GRO	OUP	
OMMUNITY/ AREA	Sub Gr	oup 3		COMMUNITY/ AREA Sub Group 4				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
WOR	1.00			WWOR	1.00			
PIX	1.00			WPIX	1.00			
PVI	0.25			WITF	0.25			
/CAU	0.25			WPVI	0.25	-		
				WCAU	0.25			
						-		
		-						
	<mark></mark>							
						-		
otal DSEs			2.50	Total DSEs			2.75	
ross Receipts Third (	Group	\$ 64	4,190.09	Gross Receipts Fo	urth Group	\$	654,163.21	
Base Rate Fee Third (	Group	\$	1,357.94	Base Rate Fee Fo	urth Group	\$	14,985.24	
se Rate Fee: Add t		<b>e fees</b> for each subs space L (page 7)	criber group	as shown in the boxe	es above.	\$	96,364.78	
se Rate Fee: Add ti			criber group	as shown in the boxe	es above.		06 264 7	

FORM SA3E. PAGE 19.

EGAL NAME OF OWN		EVISION, INC.						
E	BLOCK A: C	OMPUTATION (	OF BASE R	ATE FEES FOR EA	CH SUBSCRI	BER GROUP		
FIFTH SUBSCRIBER GROUP				SIXTH SUBSCRIBER GROUP				
OMMUNITY/ AREA Sub Group 5			COMMUNITY/ AR	EA Sub Gro	up 6		Compu	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	CALL SIGN DSE CALL SIGN DSE			
WWOR	1.00			WWOR	1.00			o Base R
VPIX	1.00			WPIX	1.00			ar
WPVI	0.25			WPVI	0.25			Syndi
WCAU	·····			WEAU	<mark></mark>			-
WCAU	0.25			WCAU	0.25			Exclu
								Surch
								fo
								Parti
								Dist
								Stati
	<mark></mark>							
otal DSEs			2.50	Total DSEs			2.50	
Gross Receints First (	Froun	¢ ,	10 789 09	Gross Receipts Se	cond Group	\$	34,064.20	
Gross Receipts First Group \$ 10,789.09				Gloss Receipts Se	34,004.20			
·						i		
		\$	228.24	Base Rate Fee Se	cond Group	\$	720.63	
	Group	\$ SUBSCRIBER GR		Base Rate Fee Se	•	\$ SUBSCRIBER GRO		
Base Rate Fee First (	Group SEVENTH S	\$ SUBSCRIBER GR		Base Rate Fee Se	EIGHTH	SUBSCRIBER GRO		
Base Rate Fee First (	Group SEVENTH S	\$ SUBSCRIBER GR			EIGHTH	SUBSCRIBER GRO		
CALL SIGN	Group SEVENTH S Sub Gro	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH	SUBSCRIBER GRO	DUP	
CALL SIGN	Group SEVENTH S Sub Gro DSE 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
CALL SIGN	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA <b>Sub Gro</b> DSE	SUBSCRIBER GRO	DUP	
COMMUNITY/ AREA	Group SEVENTH S Sub Gro DSE 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
COMMUNITY/ AREA	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
COMMUNITY/ AREA	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
Base Rate Fee First (	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
COMMUNITY/ AREA	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
COMMUNITY/ AREA	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
Base Rate Fee First ( COMMUNITY/ AREA CALL SIGN WWOR WPIX	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
Base Rate Fee First ( COMMUNITY/ AREA CALL SIGN WWOR WPIX	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
COMMUNITY/ AREA	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
Base Rate Fee First ( COMMUNITY/ AREA CALL SIGN WWOR WPIX	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
COMMUNITY/ AREA	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
Base Rate Fee First ( COMMUNITY/ AREA CALL SIGN WWOR WPIX	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
COMMUNITY/ AREA	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
CALL SIGN	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
CALL SIGN VWOR VPIX VPVI	Group SEVENTH S Sub Gro DSE 1.00 1.00	\$ SUBSCRIBER GR DUP 7	ROUP	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00	SUBSCRIBER GRO	DUP	
Base Rate Fee First ( COMMUNITY/ AREA CALL SIGN WWOR WPIX WPVI	Sroup SEVENTH 3 Sub Gro DSE 1.00 1.00 0.25	\$ SUBSCRIBER GR DUP 7 CALL SIGN	ROUP DSE	COMMUNITY/ AR	EIGHTH EA Sub Groo DSE 1.00 1.00	SUBSCRIBER GRC up 8 CALL SIGN	DUP DSE	
COMMUNITY/ AREA	Sroup SEVENTH 3 Sub Gro DSE 1.00 1.00 0.25	\$ SUBSCRIBER GR DUP 7 CALL SIGN	COUP DSE	COMMUNITY/ ARI	EIGHTH EA Sub Groo DSE 1.00 1.00	SUBSCRIBER GRC up 8 CALL SIGN	DUP	

Gross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         Image: Community Area		RIC CABL	E SYSTEM: EVISION, INC.				S	6553 6553	Na	
COMMUNITY/ AREA         Sub Group 9         COMMUNITY/ AREA         Sub Group 10           CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         DS           WWOR         1.00         WWOR         1.00         WWOR         1.00         Image: State	B				TE FEES FOR EAG					
CALL SIGN         DSE         CALL SIGN         DSE         CALL SIGN         D           VWOR         1.00          WWOR         1.00             WPIX         1.00          WPIX         1.00             WPIX         1.00                 WPIX         1.00                    WPIX         1.00 </th <th></th> <th></th> <th></th> <th>IP</th> <th>  </th> <th></th> <th></th> <th>UP</th> <th>ļ</th>				IP				UP	ļ	
WWOR         1.00         WWOR         1.00           WPIX         1.00         WPIX         1.00           WPIX         1.00         WPIX         1.00           WAR         1.00         WPIX         1.00           WPIX         1.00         WPIX         1.00           WAR         1.00         WAR         1.00           WAR         1.00         WAR         1.00           WAR         1.00         WAR         1.00           WAR         1.00         WAR         1.00           Gross Receipts First Group         \$         1.491           ELEVENTH SUBSCRIBER GROUP         Total DSE         COMMUNITY/ AREA           CALL SIGN         DSE         CALL SIGN         DSE           CALL SIGN         DSE         CALL SIGN         DSE           ALL SIGN         DSE         ALL SIGN         A	COMMUNITY/ AREA Sub Group 9				COMMUNITY/ ARE	A Sub Gro	oup 10		Comp	
WPIX         1.00         WPIX         1.00         Image: constraint of the second	ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN			
Total DSEs       2.00       Total DSEs       2.00         Gross Receipts First Group       \$ 1,391,855.11       Gross Receipts Second Group       \$ 84,488.         Base Rate Fee First Group       \$ 24,566.24       Base Rate Fee Second Group       \$ 84,488.         COMUNITY/ AREA       0       COMUNITY/ AREA       0       COMUNITY/ AREA         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE         Group       1       1       1       1       1       1       1         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D	VOR	1.00			WWOR	1.00			Base F	
Gross Receipts First Group       \$        1,391,855.11       Gross Receipts Second Group       \$        84,488.         Base Rate Fee First Group       \$        24,566.24       Base Rate Fee Second Group       \$        1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       C         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       Image: Community of the second Group       Image: Commu	١X	1.00			WPIX	1.00			а	
Gross Receipts First Group       \$        1,391,855.11       Gross Receipts Second Group       \$        84,488.         Base Rate Fee First Group       \$        24,566.24       Base Rate Fee Second Group       \$        1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       C         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       Image: Community of the second Group       Image: Commu									Sync	
Gross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       1       1         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       1       <							-		Excl	
Gross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       1<									Surc	
Stross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       D       COMMUNITY/ AREA       0       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       0       0         CALL SIGN       DSE       CALL SIGN       D       0 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>1</td>									1	
Bross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       1									Par	
Siross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Hase Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       C         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       C         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       C         CALL SIGN       DSE       CALL SIGN       D       C       C       C       C         CALL SIGN       D       C       C       C       C       C       C       C         CALL SIGN       D       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       <									Dis	
iross Receipts First Group <u>\$ 1,391,855.11</u> iase Rate Fee First Group <u>\$ 24,566.24</u> ELEVENTH SUBSCRIBER GROUP COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN D COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN D COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN D CALL SIGN DSE CALL SIGN D COMMUNITY/ AREA CALL SIGN DSE CALL SIGN D CALL SIGN							-		Sta	
Siross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Hase Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       C         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       C         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       C         CALL SIGN       DSE       CALL SIGN       D       C       C       C       C         CALL SIGN       D       C       C       C       C       C       C       C         CALL SIGN       D       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       <					]		]			
Bross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       1					][		]			
Siross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Hase Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       C         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       C         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       C         CALL SIGN       DSE       CALL SIGN       D       C       C       C       C         CALL SIGN       D       C       C       C       C       C       C       C         CALL SIGN       D       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       C       <							<b>_</b>			
Bross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       1		H								
Stross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       D       COMMUNITY/ AREA       0       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       0       0         CALL SIGN       DSE       CALL SIGN       D       0 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>										
Bross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       1										
Siross Receipts First Group       \$       1,391,855.11       Gross Receipts Second Group       \$       84,488.         Base Rate Fee First Group       \$       24,566.24       Base Rate Fee Second Group       \$       1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP       COMMUNITY/ AREA       0       COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D       0	al DSEs			2.00	Total DSEs			2.00		
Base Rate Fee First Group          Sase Rate Fee First Group       \$ 24,566.24         Base Rate Fee Second Group       \$ 1,491.         ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         CALL SIGN       DSE       CALL SIGN       D       D       D         CALL SIGN       DSE       CALL SIGN       D       D       D         COMMUNITY/ AREA       CALL SIGN       D       CALL SIGN       D       D         CALL SIGN       DSE       CALL SIGN       D       CALL SIGN       D       D         CALL SIGN       D       CALL SIGN       D       CALL SIGN       D       CALL SIGN       D         CALL SIGN		- Group	s 1.391.			ond Group	\$	84,488.71		
ELEVENTH SUBSCRIBER GROUP       TWELVTH SUBSCRIBER GROUP         COMMUNITY/ AREA       0         CALL SIGN       DSE       CALL SIGN       DSE         CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D										
COMMUNITY/ AREA CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN D COMMUNITY/ AREA CALL SIGN D CALL SIGN C CA	e Rate Fee First G	Group	\$ 24,	566.24	Base Rate Fee Sec	ond Group	\$	1,491.23		
CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       DSE       CALL SIGN       D         Image: Control of the strength of the strengt of the strength of the strength of the streng strength of the st	E	ELEVENTH S	SUBSCRIBER GROU	IP	TWELVTH SUBSCRIBER GROUP					
	MMUNITY/ AREA			0	COMMUNITY/ AREA 0					
	ALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
		<b></b>								
		<u> </u>								
		<u> </u>								
	al DSEs	-		0.00	Total DSEs			0.00		
Gross Receipts Third Group \$ 0.00 Gross Receipts Fourth Group \$ 0.	ross Receipts Third Group \$ 000			0.00	Gross Receipts Fou	rth Group	\$	0.00		
						· - · - «h	·			
Base Rate Fee Third Group     \$     0.00       Base Rate Fee Fourth Group     \$	Base Rate Fee Third Group \$ 0.00		0.00	Base Rate Fee Fou	rth Group	\$	0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.	e Rate Fee Third (	Group								

EGAL NAME OF OWNE						S	YSTEM ID#	Name
SERVICE ELECTR		LEVISION, INC.					6553	Hame
В	LOCK A:	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	IBER GROUP		
	FIRST	SUBSCRIBER GROU	JP		SECOND SUBSCRIBER GROUP		UP	•
COMMUNITY/ AREA	Sub Gr	oup 1		COMMUNITY/ AREA	Sub Gro	oup 2		9
								Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
								Base Rate
								and
								Syndicate
								Exclusiv
								Surcharg
								for
								Partially
						-		Distant
								Stations
						-		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	roup	s 1.415	,792.36	Gross Receipts Secon	d Group	\$	54,511.92	
	loup	<u> </u>	,102.00			÷	04,011.02	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Secon	d Group	\$	0.00	
	חמוחב	SUBSCRIBER GROU	ID		EOUDTU	SUBSCRIBER GRO		
			JF				UF	
COMMUNITY/ AREA	Sub Gr	oup 3		COMMUNITY/ AREA	Sub Gro	oup 4		
			<b>D</b> 05					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
		-				-		
		-				-		
						-		
						-		
						-		
otal DSEs			0.00	Total DSEs	1		0.00	
Gross Receipts Third (	Group	\$ 64	,190.09	Gross Receipts Fourth	Group	\$ 6	54,163.21	
Base Rate Fee Third (	Group	\$	0.00	Base Rate Fee Fourth	Group	\$	0.00	
ase Rate Fee: Add th			riber group	as shown in the boxes a	bove.		0.00	

SERVICE ELECTE		E SYSTEM:				SY	STEM ID#	Name
		LEVISION, INC.					6553	Name
B	LOCK A: (	COMPUTATION OF	BASE RA	TE FEES FOR EACH	SUBSCR	BER GROUP		
	FIFTH	SUBSCRIBER GROU	JP	SIXTH SUBSCRIBER GROUP			D	•
COMMUNITY/ AREA	Sub Gr	oup 5		COMMUNITY/ AREA	Sub Gro	up 6		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 G	roup	\$ 10,	,789.09	Gross Receipts Secon	d Group	\$ 34	4,064.20	
	Toup	÷ ;;	100.00			<u> </u>	1,001.20	
Base Rate Fee First G	roup	\$	0.00	Base Rate Fee Second	d Group	\$	0.00	
	SEVENTH	SUBSCRIBER GROU	JP		EIGHTH	SUBSCRIBER GROUF	þ	
COMMUNITY/ AREA				COMMUNITY/ AREA				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
			1					
		-						
Total DSEs				Total DSEs				
			0.00	Total DSEs			0.00	
Total DSEs Gross Receipts Third C		s 1,222,	0.00	Total DSEs Gross Receipts Fourth	Group	s 17:	0.00 3,624.70	
	jroup	\$ 1,222,			Group	<u>\$</u> 17:		
		<u>\$ 1,222,</u>			-	<u>s</u> 17:		
Gross Receipts Third C			,178.16	Gross Receipts Fourth	-		3,624.70	
Gross Receipts Third C			,178.16	Gross Receipts Fourth	-		3,624.70	
Gross Receipts Third C Base Rate Fee Third C	Group The <b>base rat</b>	\$	,178.16 0.00	Gross Receipts Fourth	Group		3,624.70	

LEGAL NAME OF OWNE SERVICE ELECTE						ŝ	6553 6553	Name
				TE FEES FOR EAG				
D		SUBSCRIBER GROU				SUBSCRIBER GRO	)UP	
COMMUNITY/ AREA				COMMUNITY/ ARE				9
	Sub Gi	oup 3		COMMONT I/ ARE				Computat
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	of
CALL SIGN	DOL	CALL SIGN	DGL	CALL SIGN	DGL	CALL SIGN	DOL	Base Rate
		-						and
								Syndicate
		-						Exclusivi
		-						Surcharg
								for
		-						Partially
								Distant
								Stations
						···		
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First G	Group	\$ 1,391	,855.11	Gross Receipts Sec	ond Group	\$	84,488.71	
	·	· · · · · ·	,		•		·	
<b>Base Rate Fee</b> First G	Group	\$	0.00	Base Rate Fee Sec	ond Group	\$	0.00	
E	LEVENTH	SUBSCRIBER GROU	JP		TWELVTH	SUBSCRIBER GRO	)UP	
COMMUNITY/ AREA			0	COMMUNITY/ ARE			0	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
0,122 0.011	202		501			0,122 0.011		
		-						
		-						
		-						
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 ti	he base rat	te fees for each subso	criber group	as shown in the boxe	s above.			
Enter here and in bloc			- T			\$		
						1	1	

## ACCOUNTING PERIOD: 2021/2

		FORM SA3E. PAGE 20.	
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SERVICE ELECTRIC CABLEVISION, INC.	SYSTEM ID# 6553	
	,		
9	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 mus 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 of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations	<ul> <li>this schedule.</li> <li>Step 2: In line 2, give the total number of DSEs by subscriber group Exempt DSEs in block C, part 7 of this schedule. If none en Step 3: In line 3, subtract line 2 from line 1. This is the total number Step 4: Compute the surcharge for each subscriber group using the surcharge for each subscript (a group using</li></ul>	TIONS: n 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. n 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. n line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. 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	
	FIRST SUBSCRIBER GROUP         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	SECOND SUBSCRIBER GROUP         Line 1: Enter the VHF DSEs	
	computation       -         SYNDICATED EXCLUSIVITY         SURCHARGE         Third Group       .         SYNDICATED EXCLUSIVITY SURCHARGE:         Add the surcharge for in the boxes above. Enter here and in block 4, line 2 of space L (page)	computation	