This form is effective beginning with the January 1 to June 30, 2017, accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

### SA3E Long Form

### STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Long Form)

General instructions are located in the first tab of this workbook.

| FOR COPYRIGHT OFFICE USE ONLY |                   |  |  |  |  |  |  |
|-------------------------------|-------------------|--|--|--|--|--|--|
| DATE RECEIVED                 | AMOUNT            |  |  |  |  |  |  |
| 0.00.04                       | \$                |  |  |  |  |  |  |
| 8-30-24                       | ALLOCATION NUMBER |  |  |  |  |  |  |
|                               |                   |  |  |  |  |  |  |
|                               |                   |  |  |  |  |  |  |

Return completed workbook by email to

coplicsoa@copyright.gov

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

| Α              | ACCOUNTING PERIOD COVERED BY THIS STATEMENT:   |   |  |             |        |
|----------------|--|---|--|-------------|--------|
| Accounting     | 2024/1   |   |  |             |        |
| Period         |  |   |  |             |        |
| B<br>Owner     | Instructions: Give the full legal name of the owner of the cable system. If the owner is rate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the busin If there were different owners during the accounting period, only the own a single statement of account and royalty fee payment covering the entire account of the entire account of the covering the entire account of the entire a | ess of the cable syste<br>er on the last day of th<br>ounting period. | m.<br>he accounting period should subr |             | 5984   |
|                | LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM  |   |  |             |        |
|                | Nortex Communications Co.  |   |  |             |        |
|                |  |   |  |             |        |
|                |  |   |  | 5984        | 420241 |
|                |  |   |  | 5984        | 2024/1 |
|                |  |   |  |             |        |
|                | P.O. Box 587   |   |  |             |        |
|                | Muenster, TX 76252   |   |  |             |        |
| С              | INSTRUCTIONS: In line 1, give any business or trade names used to  | •   |  |             |        |
| C              | names already appear in space B. In line 2, give the mailing address   | of the system, if di  | ferent from the address give           | n in space  | В.     |
| System         | 1 IDENTIFICATION OF CABLE SYSTEM:  |   |  |             |        |
|                | MAILING ADDRESS OF CABLE SYSTEM:   |   |  |             |        |
|                | 2 (Number, street, rural route, apartment, or suite number)  |   |  |             |        |
|                | (City, town, state, zip code)  |   |  |             |        |
| _              |  |   |  |             |        |
| D              | Instructions: For complete space D instructions, see page 1b. Ident  | ty only the first con   | nmunity served below and rel           | ist on page | ∌ 1b   |
| Area<br>Served | with all communities.  CITY OR TOWN  | STATE   |  |             |        |
| First          | Muenster   | TX  |  |             |        |
| Community      | Below is a sample for reporting communities if you report multiple of  |   | Snace G                                |             |        |
|                | CITY OR TOWN (SAMPLE)  | STATE   | CH LINE UP                             | SUB         | GRP#   |
| Sample         | Alda   | MD  | Α                                      |             | 1      |
| Janipie        | Alliance   | MD  | В                                      |             | 2      |
|                | Gering   | MD  | В                                      |             | 3      |

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  |                    |                    | SYSTEM ID# |                        |  |  |  |  |  |  |
|---|--------------------|--------------------|------------|------------------------|--|--|--|--|--|--|
| Nortex Communications Co.   |                    |                    | 5984       |                        |  |  |  |  |  |  |
| Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas." 47 C.F.R. §76.5(dd). The first 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 hon below the identified city or town.   | ne parks should be | e reported in pare | ntheses    |                        |  |  |  |  |  |  |
| If all communities receive the same complement of television broadcast stations (i.e., or all communities with the channel line-up "A" in the appropriate column below or leave the on a partially distant or partially permitted basis in the DSE Schedule, associate each redesignated by a number (based on your reporting from Part 9).   | e column blank. It | you report any st  | ations     |                        |  |  |  |  |  |  |
| When reporting the carriage of television broadcast stations on a community-by-commuchannel line-up designated by an alpha-letter(s) (based on your Space G reporting) and (based on your reporting from Part 9 of the DSE Schedule) in the appropriate columns to  | a subscriber grou  |                    |            |                        |  |  |  |  |  |  |
| CITY OR TOWN  | STATE              | CH LINE UP         | SUB GRP#   | _                      |  |  |  |  |  |  |
| Muenster  | TX                 |                    | 1          | First                  |  |  |  |  |  |  |
| Valley View   | TX                 |                    | 1          | Community              |  |  |  |  |  |  |
| Lindsay   | TX                 |                    | 1          |                        |  |  |  |  |  |  |
| Lake Kiowa  | TX                 |                    | 1          |                        |  |  |  |  |  |  |
| Saint Jo  | TX                 |                    | 1          |                        |  |  |  |  |  |  |
| Myra  | TX                 |                    | 1          | See instructions for   |  |  |  |  |  |  |
| Rosston   | TX                 |                    | 1          | additional information |  |  |  |  |  |  |
| Forestburg  | TX                 |                    | 1          | on alphabetization.    |  |  |  |  |  |  |
| Gainesville   | TX                 |                    | 1          |                        |  |  |  |  |  |  |
| Collinsville  | TX                 |                    | 1          |                        |  |  |  |  |  |  |
| Unincoporated areas of Cooke County   | TX                 |                    | 1          |                        |  |  |  |  |  |  |
|   |                    |                    |            | Add rows as necessary. |  |  |  |  |  |  |
|   |                    |                    |            |                        |  |  |  |  |  |  |
|   |                    |                    |            |                        |  |  |  |  |  |  |
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|   |                    |                    |            |                        |  |  |  |  |  |  |
|   |                    |                    |            |                        |  |  |  |  |  |  |
|   |                    |                    |            |                        |  |  |  |  |  |  |
|   |                    |                    |            |                        |  |  |  |  |  |  |
|   |                    |                    |            |                        |  |  |  |  |  |  |
|   |                    |                    |            |                        |  |  |  |  |  |  |
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|   |                    |                    |            |                        |  |  |  |  |  |  |
|   |                    |                    |            |                        |  |  |  |  |  |  |

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|   |                        |   |   |   |
|   |                        |   |   |   |
|   |                        |   |   | 1 |

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Nortex Communications Co.

SYSTEM ID# 5984

### Ε

### Secondary Transmission Service: Subscribers and Rates

### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

| BL   | BLOCK 1    BLOCK 2 |    |        | BLOCK 2                              |
|--|--------------------|----|--------|--------------------------------------|
|  | NO. OF             |    |        | NO. OF                               |
| CATEGORY OF SERVICE                              | SUBSCRIBERS        |    | RATE   | CATEGORY OF SERVICE SUBSCRIBERS RATE |
| Residential:                                     |                    |    |        |                                      |
| <ul> <li>Service to first set</li> </ul>         | 1,667              | \$ | 21.00  |                                      |
| <ul> <li>Service to additional set(s)</li> </ul> | 1,451              | \$ | 70.00  |                                      |
| <ul> <li>FM radio (if separate rate)</li> </ul>  |                    | Ĭ  |        |                                      |
| Motel, hotel                                     | 11                 | \$ | 379.64 |                                      |
| Commercial                                       | 4                  | \$ | 425.05 |                                      |
| Converter  |                    |    |        |                                      |
| Residential                                      |                    |    |        |                                      |
| Non-residential                                  |                    |    |        |                                      |
|  |                    | 1  |        |                                      |

### F

### Services Other Than Secondary Transmissions: Rates

### SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

|   | BLO          | CK 1                          |    |                      | BLOCK 2              |         |
|---|--------------|-------------------------------|----|----------------------|----------------------|---------|
| CATEGORY OF SERVICE                         | RATE         | CATEGORY OF SERVICE           | F  | RATE                 | CATEGORY OF SERVICE  | RATE    |
| Continuing Services:                        |              | Installation: Non-residential |    |                      |                      |         |
| Pay cable                                   | \$<br>15.00  | Motel, hotel                  |    |                      | Digital Services:    |         |
| <ul> <li>Pay cable—add'l channel</li> </ul> | \$<br>11.00  | Commercial                    |    |                      | Digital Gateway      | \$0.00  |
| Fire protection                             | <br>••••••   | • Pay cable                   |    |                      | Digital Home Theater | \$10.00 |
| •Burglar protection                         | <br>••••••   | Pay cable-add'l channel       |    | Digital Receiver DVR | \$11.00              |         |
| Installation: Residential                   | <br>••••••   | Fire protection               |    |                      | 3rd or more DTA      | \$3.00  |
| • First set                                 |              | Burglar protection            |    |                      | EVO Boxes            | \$5.00  |
| <ul> <li>Additional set(s)</li> </ul>       | \$<br>250.00 | Other services:               |    |                      |                      |         |
| • FM radio (if separate rate)               | <br>••••••   | Reconnect                     | \$ | 15.00                | HDTV Services:       |         |
| Converter                                   | <br>         | Disconnect                    |    |                      | HDTV Theater         | \$10.00 |
|   | <br>         | Outlet relocation             | \$ | 85.00                |                      |         |
|   |              | Move to new address           |    |                      |                      |         |
|   |              |                               |    |                      |                      |         |

| FORM SA3E. PAGE 3.  |  |  |  |  |  | .1  |
|---|--|--|--|--|--|---|
| LEGAL NAME OF OWN   |  |  |  |  | SYSTEM ID#   | Name  |
| Nortex Commu  | nications C  | 0.   |  |  | 5984   | •   |
| PRIMARY TRANSMITTE  | RS: TELEVISIO  | N  |  |  |  |   |
| carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specific FC • Do not list the station station was carried • List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the | ystem during the ons in effect or .61(e)(2) and (esis, as explaine stations: With a CC rules, regulation of the control of the | ne accounting a June 24, 19 4), or 76.63 (red in the next prespect to any ations, or autifulations, or | period, except<br>81, permitting the<br>eferring to 76.6 paragraph.<br>distant stations<br>norizations:<br>tit in space I (the<br>ation was carried<br>tute basis station<br>report origination<br>coording to its ow<br>the reported in the<br>ass assigned to  | (1) stations carried carriage of cert 1(e)(2) and (4))]; as carried by your one Special Statemed both on a substitus, see page (v) on program service er-the-air designation of the television statement of the service of the television statement of the carried service of the carr | s and low power television stations) ad only on a part-time basis under ain network programs [sections and (2) certain stations carried on a sable system on a substitute program ent and Program Log)—if the tute basis and also on some other of the general instructions located es such as HBO, ESPN, etc. Identify stion. For example, report multi- th stream separately; for example ion for broadcasting over-the-air in may be different from the channel | Primary<br>Transmitters:<br>Television      |
| educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the                            | in each case we entering the lessast), "E" (for no se terms, see pation is outside ce area, see paye entered "Yeare distant station on a part-tirion of a distant entered into on a primary transistimulcasts, also ree categories e location of eacanadian statio   | whether the stater "N" (for no commercial page (v) of the the local sendage (v) of the es" in column on during the me basis becamulticast stranor before Jumitter or an action enter "E". If the see page (v) ch station. Forns, if any, giv   | etwork), "N-M" (in educational), or ender general instructive area, (i.e. "or general instructive area, (i.e. "or accounting period accounting period accounting period area that is not a seam that is not | for network multic<br>or "E-M" (for nonce<br>ctions located in the<br>distant"), enter "Yelions located in the<br>mplete column 5,<br>od. Indicate by en<br>activated channel<br>subject to a royalty<br>tween a cable systemen a cable sys-<br>senting the prima<br>channel on any of<br>instructions locate<br>list the community  | es". If not, enter "No". For an ex- e paper SA3 form. stating the basis on which your tering "LAC" if your cable system capacity. y payment because it is the subject stem or an association representing ry transmitter, enter the designa- ther basis, enter "O." For a further ed in the paper SA3 form. y to which the station is licensed by the n which the station is identified.   |   |
|   |  | CHANN  | EL LINE-UP   | AA   |  | 1   |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |   |
| KDTN  | 2  | E  | No   |  | DENTON, TX   |   |
| KDFW  | 4  | I  | No   |  | DALLAS, TX   | San instructions for                        |
| KDFW-3  | 4.3  | I-M  | No   |  | DALLAS, TX   | See instructions for additional information |
| KXAS  | 5  | N  | No   |  | FORT WORTH, TX   | on alphabetization.                         |
| KXAS-2  | 5.2  | N-M  | No   |  | FORT WORTH, TX   |   |
|   |  | ·····  |  |  |  |   |
| WEAA  | 8  | N<br>N M   | No<br>No   |  | DALLAS, TX   |   |
| WFAA-2  | 8.2  | N-M  | No   |  | DALLAS, TX   |   |
| WFAA-3  | 8.3  | N-M  | No<br>   |  | DALLAS, TX   |   |
| WFAA-4  | 8.4  | N-M  | No   |  | DALLAS, TX   |   |
| KTVT  | 11   | N  | No   |  | FORT WORTH, TX   |   |
| KTVT-2  | 11.2   | N-M  | No   |  | FORT WORTH, TX   |   |
| KTVT-3  | 11.3   | N-M  | No   |  | FORT WORTH, TX   |   |
| KXII  | 12   | N  | No   |  | SHERMAN, TX  |   |
| KERA  | 13   | Е  | No   |  | DALLAS, TX   |   |
| KERA-2  | 13.2   | E-M  | No   |  | DALLAS, TX   |   |
| KERA-3  | 13.3   | E-M  | No   |  | DALLAS, TX   |   |
| KERA-4  | 13.4   | E-M  | No   |  | DALLAS, TX   |   |
|   |  |  |  |  |  |   |
| KTXA  | 21   |  | No   |  | FORT WORTH, TX   |   |

SYSTEM ID# LEGAL NAME OF OWNER OF CABLE SYSTEM: Name 5984 Nortex Communications Co. PRIMARY TRANSMITTERS: TELEVISION

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

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WFTA-simulcast)

Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.

Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.

Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.

For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

|                 |                                | CHANN                    | EL LINE-UP                 | AB                                      |                        |
|-----------------|--------------------------------|--------------------------|----------------------------|---|------------------------|
| 1. CALL<br>SIGN | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE<br>OF<br>STATION | 4. DISTANT?<br>(Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION |
| KDFI            | 27                             | N                        | No                         |   | DALLAS, TX             |
| KDFI-2          | 27.2                           | N-M                      | No                         |   | DALLAS, TX             |
| KDFI-3          | 27.3                           | N-M                      | No                         |   | DALLAS, TX             |
| KDFI-5          | 27.5                           | N-M                      | No                         |   | DALLAS, TX             |
| KMPX            | 29                             | I                        | No                         |   | DECATUR, TX            |
| KDAF            | 33                             | N                        | No                         |   | DALLAS, TX             |
| KDAF-2          | 33.2                           | N-M                      | No                         |   | DALLAS, TX             |
| KDAF-3          | 33.3                           | N-M                      | No                         |   | DALLAS, TX             |
| KDAF-4          | 33.4                           | N-M                      | No                         |   | DALLAS, TX             |
| KXTX            | 39                             | N                        | No                         |   | DALLAS, TX             |
| KTXD            | 47                             | I                        | No                         |   | GREENVILLE, TX         |
| KFWD            | 52                             | I                        | No                         |   | FORT WORTH, TX         |
| KAZD            | 55                             | N                        | No                         |   | LAKE DALLAS, TX        |
| KAZD-2          | 55.2                           | N-M                      | No                         |   | LAKE DALLAS, TX        |
| KDTX            | 58                             | N                        | No                         |   | DALLAS, TX             |
| KPXD            | 68                             | N                        | No                         |   | ARLINGTON, TX          |

G

Primary Transmitters: Television

| LEGAL NAME OF OWN  | IER OF CABLE SY   | STEM:   |  |  | SYSTEM ID#  |   |
|--|---|---|--|--|---|---|
| Nortex Commu   |   |   |  |  | 5984  | Namo  |
|  |   |   |  |  |   |   |
| carried by your cable s<br>FCC rules and regulat<br>76.59(d)(2) and (4), 76<br>substitute program bas<br>Substitute Basis S<br>basis under specifc FC  | G, identify every<br>system during the<br>ions in effect or<br>6.61(e)(2) and (-<br>sis, as explaine<br>stations: With r<br>CC rules, regular<br>here in space  | television st<br>ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next<br>respect to any<br>tions, or auth<br>G—but do lis   | g period, except<br>81, permitting th<br>referring to 76.6'<br>paragraph.<br>y distant stations<br>norizations:  | (1) stations carried<br>ne carriage of certa<br>1(e)(2) and (4))]; a<br>s carried by your c  | and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the  | <b>G</b> Primary  Transmitters:  Television |
| basis. For further in in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA-simulcast).  Column 2: Give the  | formation conc<br>rm.<br>th station's call<br>associated with<br>L-2". Simulcast<br>e channel number. For example   | erning substingsign. Do not to a station ac streams must be the FCC he, WRC is Ch   | tute basis station report origination cording to its over the reported in the cordinal assigned to the state of the cordinal assigned to the cordi | ns, see page (v) o<br>n program service<br>er-the-air designa<br>column 1 (list each<br>the television stati   | ute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify tion. For example, report multin stream separately; for example on for broadcasting over-the-air in may be different from the channel  |   |
| educational station, by (for independent multice For the meaning of the Column 4: If the steplanation of local service Column 5: If you he cable system carried the distant state For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the | entering the lecast), "E" (for no ese terms, see pation is outside ce area, see paure entered "Yene distant station on a part-tirion of a distant entered into or a primary transsimulcasts, also aree categories, e location of ea Canadian statio | tter "N" (for noncommercial coage (v) of the the local servinge (v) of the es" in column on during the me basis becamulticast strong or before Jumitter or an accenter "E". If a see page (v) ch station. Fons, if any, giv | etwork), "N-M" (in educational), of e general instruct vice area, (i.e. "or general instruct 4, you must correct accounting per ause of lack of a earn that is not a sune 30, 2009, be a sociation repreyou carried the or U.S. stations, we the name of the   | for network multica<br>or "E-M" (for nonco<br>ctions located in the<br>distant"), enter "Ye<br>ions located in the<br>mplete column 5, s<br>od. Indicate by ent<br>activated channel of<br>subject to a royalty<br>stween a cable sys<br>senting the primar<br>channel on any of<br>instructions locate<br>list the community<br>me community with | epaper SA3 form. etating the basis on which your ering "LAC" if your cable system capacity. expanded because it is the subject etem or an association representing ey transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the which the station is identifed. |   |
|  |   | CHANN   | EL LINE-UP   | AC   |   |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |   |
|  |   |   |  |  |   |   |
|  |   |   |  |  | <u> </u>  | 1   |

| LEGAL NAME OF OWN   | ER OF CABLE SY   | STEM:   |  |  | SYSTEM ID  | ŧ l   |
|---|--|---|--|--|--|---|
| Nortex Commu  |  |   |  |  | 5984   | Namo  |
| PRIMARY TRANSMITTE  | RS: TELEVISIO  | N   |  |  |  |   |
| In General: In space G carried by your cable so FCC rules and regulating 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis Substitute Basis Subsis under specific FC Do not list the station station was carried a List the station here, a basis. For further interest in the paper SA3 for Column 1: List each  | s, identify every ystem during the ons in effect or .61(e)(2) and (-61(e)(2) and (-61(e)(2)) and (-61(e)(2)) and also in space only on a substand also in space formation concern.   | r television starte accounting in June 24, 194, or 76.63 d in the next prespect to any tions, or auth G—but do listitute basis.  In the starter of the starter is the starter is substituted in the starter is sign. Do not respect to any the starter is sign.                                       | g period, except<br>81, permitting th<br>referring to 76.6'<br>paragraph.<br>distant stations<br>porizations:<br>t it in space I (th<br>ation was carried<br>tute basis station  | (1) stations carried be carriage of certain (e)(2) and (4))]; and carried by your carried by your carried both on a substitute, see page (v) or a program services   | and low power television stations) d only on a part-time basis under nin network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other if the general instructions located as such as HBO, ESPN, etc. Identify               | G<br>Primary<br>Transmitters:<br>Television |
| cast stream as "WETA WETA-simulcast).  Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the staplanation of local service Column 5: If you had cable system carried the carried the distant static For the retransmission of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these the Column 6: Give these | -2". Simulcast channel numble. For example stem carried the in each case wentering the least), "E" (for no se terms, see particular static on on a part-tiron of a distant entered into or a primary transicity in the categories, a location of each anadian statio | streams must ber the FCC her, WRC is Charle station. Whether the stater "N" (for noncommercial bage (v) of the local sender in column on during the same basis becamulticast stream or before Jumitter or an assistent of the local sender "E". If the see page (v) ch station. For no, if any, given | t be reported in or<br>has assigned to a<br>annel 4 in Wash<br>tation is a netwo<br>etwork), "N-M" (i<br>I educational), o<br>e e general instruc-<br>vice area, (i.e. "or<br>general instructor<br>4, you must cor<br>accounting perior<br>ause of lack of a<br>earn that is not se<br>ane 30, 2009, be<br>association repre<br>you carried the<br>or U.S. stations,<br>e the name of the | the television stati- strington, D.C. This wrk station, an indefor network multica- or "E-M" (for nonco- ctions located in the distant"), enter "Ye ions located in the inplete column 5, s od. Indicate by ent ictivated channel of subject to a royalty where a cable sys senting the primar channel on any ott instructions located list the community ine community with | s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject tem or an association representing y transmitter, enter the designation the paper SA3 form. to which the station is licensed by the which the station is identifed. |   |
|   |  | CHANN   | EL LINE-UP   | AD   |  | <u> </u>                                    |
| 1. CALL SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE OF STATION  | 4. DISTANT? (Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |   |

| LEGAL NAME OF OWN  | IER OF CABLE SY  | STEM:  |   |  | SYSTEM ID#  |   |
|--|--|--|---|--|---|---|
| Nortex Commu   |  |  |   |  | 5984  | Namo  |
|  |  |  |   |  |   |   |
| carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried   | G, identify every<br>system during the<br>ions in effect or<br>6.61(e)(2) and (-<br>sis, as explaine<br>stations: With r<br>CC rules, regular<br>here in space<br>only on a substant                                     | r television st<br>ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next<br>respect to any<br>ations, or auth<br>G—but do lis<br>titute basis.  | g period, except<br>181, permitting the<br>referring to 76.6<br>paragraph.<br>y distant stations<br>norizations:<br>tit in space I (the   | (1) stations carried<br>the carriage of certain<br>(e)(2) and (4))]; and<br>s carried by your comes special Statement  | and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the  | <b>G</b> Primary  Transmitters:  Television |
| basis. For further in in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA-simulcast).  Column 2: Give the  | formation conc<br>rm.<br>th station's call<br>associated with<br>L-2". Simulcast<br>e channel number. For example  | sign. Do not on a station ac<br>streams must<br>ber the FCC he, WRC is Ch  | tute basis station report origination cording to its over the reported in the case assigned to the case as a same | ns, see page (v) o<br>n program service<br>er-the-air designa<br>column 1 (list each<br>the television stati   | ute basis and also on some other f the general instructions located s such as HBO, ESPN, etc. Identify tion. For example, report multin stream separately; for example on for broadcasting over-the-air in may be different from the channel  |   |
| educational station, by (for independent multice For the meaning of the Column 4: If the steplanation of local service Column 5: If you he cable system carried the distant state For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these the Column 6: Give the | entering the lecast), "E" (for no ese terms, see pation is outside ce area, see parave entered "Year ion of a distant entered into or a primary transisimulcasts, also aree categories, e location of ea Canadian statio | tter "N" (for noncommercial page (v) of the the local servage (v) of the ses" in column on during the me basis becamulticast strong or before Jumitter or an accenter "E". If the see page (v) ch station. Fons, if any, giv | etwork), "N-M" (in educational), or e general instructive area, (i.e. "or general instructive area, (i.e. "or accounting period ause of lack of a seam that is not a sune 30, 2009, be ssociation repression under the control of the general in the control of the general instruction.  | for network multica<br>or "E-M" (for nonco<br>ctions located in the<br>distant"), enter "Ye<br>ions located in the<br>mplete column 5, s<br>od. Indicate by ent<br>activated channel of<br>subject to a royalty<br>stween a cable sys<br>senting the primar<br>channel on any of<br>instructions locate<br>list the community<br>me community with | epaper SA3 form. etating the basis on which your ering "LAC" if your cable system capacity. expanded because it is the subject etem or an association representing ey transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the which the station is identifed. |   |
|  |  | CHANN  | EL LINE-UP  | AE   |   |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |   |
|  |  |  |   |  |   |   |
|  |  |  |   |  | <u> </u>  | 1   |

| LEGAL NAME OF OWN  | ER OF CARLE SV  | STEM:  |  |  | SYSTEMI   | ID#                              |
|--|---|--|--|--|---|----------------------------------|
| Nortex Commu   |   |  |  |  |   | Name                             |
| PRIMARY TRANSMITTE   |   |  |  |  |   |                                  |
| In General: In space G<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas   | 6, identify every ystem during the ons in effect or .61(e)(2) and (4 is, as explaine  | television state accounting June 24, 19<br>1), or 76.63 (rd in the next  | g period, except<br>81, permitting the<br>referring to 76.6°<br>paragraph.   | (1) stations carried<br>ne carriage of certa<br>1(e)(2) and (4))]; a   | and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program  | Primary Transmitters: Television |
| basis under specifc FC Do not list the station station was carried List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the | C rules, regular here in space only on a substand also in spatformation concern. In station's call associated with associated with associated with associated with a channel number. For example stem carried the in each case wentering the least), "E" (for no se terms, see pation is outside to a carea, see pation of a distant static on on a part-tirion of a distant entered into or a primary transistimulcasts, also ree categories, a location of each canadian statio | attions, or auth G—but do list itute basis. Ince I, if the state erning substitute basis. In a station active and streams must be the FCC has whether the station. If the local service in column on during the arm of before Jumitter or an active page (v) of the basis becamulticast streams in column or during the arm of before Jumitter or an active page (v) of the basis becamulticast stream or before Jumitter or an active page (v) of station. For the page (v) of the basis becamulticast stream or before Jumitter or an active page (v) of station. For the page (v) of station. For the page (v) of the station. For the page (v) of the page | ti ti in space I (the ation was carried tute basis station report origination cording to its over the reported in the ation was assigned to the annel 4 in Wash tation is a network), "N-M" (the ation is a network), "N-M" (t | d both on a substitute, see page (v) on program service er-the-air designate column 1 (list each the television statington, D.C. This limited for network multicair "E-M" (for noncontroll control located in the inplete column 5, so d. Indicate by entituted channel of subject to a royalty stween a cable syes senting the primary channel on any of instructions located list the community with | ent and Program Log)—if the  ute basis and also on some other if the general instructions located  is such as HBO, ESPN, etc. Identify tion. For example, report multi- instream separately; for example  on for broadcasting over-the-air in may be different from the channel  upendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast), ite paper SA3 form, is". If not, enter "No". For an ex- is paper SA3 form, itating the basis on which your ering "LAC" if your cable system capacity. In payment because it is the subject item or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed. | Television                       |
| Note: if you are dailed  | g manple onai   | •  | EL LINE-UP   |  | onamo mo up.  | <del></del>                      |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |                                  |
|  |   |  |  |  |   |                                  |
|  |   |  |  |  |   |                                  |

| LEGAL NAME OF OWN  | ER OF CABLE SY   | STEM:   |  |  | SYSTEM ID#  |   |
|--|--|---|--|--|---|---|
| Nortex Commu   |  |   |  |  | 5984  | Name                                      |
| PRIMARY TRANSMITTE   | RS: TELEVISIO  | N   |  |  |   |   |
| carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here,   | G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explaine stations: With r CC rules, regular here in space only on a substand also in spaformation concerns.   | r television st<br>ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next<br>respect to any<br>ations, or auth<br>G—but do lis<br>titute basis.   | g period, except<br>181, permitting th<br>referring to 76.6°<br>paragraph.<br>y distant stations<br>norizations:<br>at it in space I (th<br>ation was carried  | (1) stations carried the carriage of certain (e)(2) and (4))]; and carried by your case Special Statemed both on a substitution of carried by the carrie | and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located  | <b>G</b> Primary Transmitters: Television |
| each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you ha cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For sexplanation of these th Column 6: Give the FCC. For Mexican or Column 6: | associated with a second case with a second case we entering the least), "E" (for not experted in southing the cast), "E" (for not experted in southing the least), "E" (for not experted in the least), and it is a primary transition of a distant entered into or a primary transition in the least experted in the least experte | n a station ac<br>streams musi-<br>per the FCC has, WRC is Challe station.<br>whether the sister "N" (for noncommercial<br>page (v) of the the local sen-<br>age (v) of the ses" in column<br>on during the me basis becamulticast stream or before Ju-<br>mitter or an account of the service of the station. For the station. For the stream of the service of the station. For the stream of the station. For the station is stream of the station. For the station is stream of the station. For the station is stream of the station is stream of the station. For the station is stream of the stream | cording to its over the reported in a case assigned to a cannel 4 in Wash tation is a network), "N-M" (in educational), or e general instruct 4, you must correct accounting period accounting p | er-the-air designar column 1 (list each column 1 (list each the television statington, D.C. This erk station, an indefor network multicator "E-M" (for noncoctions located in the distant"), enter "Ye ions located in the mplete column 5, so do. Indicate by entractivated channel or activated channel or activated the primar channel on any of instructions locate list the community with  | epaper SA3 form. etating the basis on which your ering "LAC" if your cable system capacity. expanded because it is the subject etem or an association representing ey transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. et to which the station is licensed by the which the station is identifed. |   |
| Note: If you are utilizing   | g multiple char  |   | ·  | •  | channel line-up.  |   |
|  |  |   | EL LINE-UP   | AG   |   |   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION  | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |   |
|  |  |   |  |  |   |   |
|  |  |   |  |  |   |   |

| LEGAL NAME OF OWN  | ER OF CARLE SV  | STEM:  |  |  | SYSTEM II  | )#                                 |
|--|---|--|--|--|--|------------------------------------|
| Nortex Commu   |   |  |  |  | 598  | Namo                               |
| PRIMARY TRANSMITTE   |   |  |  |  |  |                                    |
| In General: In space G<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas   | 6, identify every ystem during the ons in effect or .61(e)(2) and (4 is, as explaine  | television state accounting June 24, 19<br>1), or 76.63 (rd in the next  | g period, except<br>81, permitting the<br>referring to 76.6°<br>paragraph.   | (1) stations carried<br>ne carriage of certa<br>1(e)(2) and (4))]; a   | and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program   | G Primary Transmitters: Television |
| basis under specifc FC  Do not list the station station was carried  List the station here, basis. For further in in the paper SA3 fo Column 1: List eac each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the FCC. For Mexican or C | C rules, regular here in space only on a substand also in spatformation concern. In station's call associated with associated with associated with associated with a channel number. For example stem carried the in each case wentering the least), "E" (for no se terms, see pation is outside to a carea, see pation of a distant static on on a part-tirion of a distant entered into or a primary transistimulcasts, also ree categories, a location of each canadian statio | attions, or auth G—but do list itute basis. Ince I, if the state erning substitute basis. In a station active and streams must be the FCC has whether the station. If the local service in column on during the arm of before Jumitter or an active page (v) of the basis becamulticast streams in column or during the arm of before Jumitter or an active page (v) of the basis becamulticast stream or before Jumitter or an active page (v) of station. For the page (v) of the basis becamulticast stream or before Jumitter or an active page (v) of station. For the page (v) of station. For the page (v) of the station. For the page (v) of the page | ti ti in space I (the ation was carried tute basis station report origination cording to its over the reported in the ation was assigned to the annel 4 in Wash tation is a network), "N-M" (the ation is a network), "N-M" (t | d both on a substitute, see page (v) on program service er-the-air designate column 1 (list each the television statington, D.C. This limited for network multicair "E-M" (for noncontroll control located in the inplete column 5, so d. Indicate by entituted channel of subject to a royalty stween a cable syes senting the primary channel on any of instructions located list the community with | ent and Program Log)—if the  ute basis and also on some other if the general instructions located  is such as HBO, ESPN, etc. Identify tion. For example, report multi- instream separately; for example  on for broadcasting over-the-air in may be different from the channel  upendent station, or a noncommercial ast), "i" (for independent), "I-M" immercial educational multicast), ie paper SA3 form. is If not, enter "No". For an ex- is paper SA3 form. Itating the basis on which your cering "LAC" if your cable system capacity. In payment because it is the subject item or an association representing by transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed. | Television                         |
| Note: If you are utilizin  | g muluple char  | •  | •  |  | channel line-up.   |                                    |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |                                    |
|  |   |  |  |  |  |                                    |
|  |   |  |  |  |  |                                    |

| LEGAL NAME OF OWN   | ER OF CARLE SV   | 'STEM:   |   |   | SYSTEM   | D#  |
|---|--|--|---|---|--|---|
| Nortex Commu  |  |  |   |   | 59   | Namo                                      |
| PRIMARY TRANSMITTE  |  |  |   |   |  | -   |
| In General: In space G<br>carried by your cable s<br>FCC rules and regulati<br>76.59(d)(2) and (4), 76<br>substitute program bas  | 6, identify every<br>ystem during the<br>ons in effect or<br>.61(e)(2) and (<br>iis, as explaine   | television stance accounting June 24, 194), or 76.63 (rd in the next   | period, except<br>81, permitting the<br>eferring to 76.6°<br>paragraph.   | (1) stations carrie<br>ne carriage of certa<br>1(e)(2) and (4))]; a   | and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program   | <b>G</b> Primary Transmitters: Television |
| basis under specifc FC  Do not list the station station was carried  List the station here, saiss. For further in in the paper SA3 for Column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servic Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the | C rules, regular here in space only on a substand also in space formation concern. In station's call associated with associated with -2". Simulcast the channel number of the cast, "E" (for not see terms, see patterns, see patterns on a part-tirion of a distant entered "Ye are distant static on a part-tirion of a distant entered into or a primary transistimulcasts, also ree categories, a location of ea canadian statio | ations, or auth G—but do list itute basis. Ince I, if the state rining substitute basis. Ince I, if the state rining substitute basis between the FCC has whether the station. In a station accommercial basis between the following the local service basis between the basis | torizations:  It it in space I (the ation was carried tute basis station report origination cording to its over the property of the general instruct and the space of lack of a general instruct and the space of lack of a general instruct and the space of lack of a general instruct and the space of lack of a general instruct and the space of lack of a general instruct and the space of lack of a general instruct or accounting period groups of lack of a general instruct or accounting period groups of lack of a general instruct or accounting period groups of lack of a general instruct or accounting period groups of lack of a general instruct or accounting period groups of lack of a general instruct or accounting period groups of the general in the space of the general instruct or the general | d both on a substitute, see page (v) of a program service er-the-air designate column 1 (list each the television statington, D.C. This limit of the television state | ent and Program Log)—if the  ute basis and also on some other if the general instructions located  is such as HBO, ESPN, etc. Identify tion. For example, report multi- in stream separately; for example  on for broadcasting over-the-air in may be different from the channel  upendent station, or a noncommercial ast), "I" (for independent), "I-M" immercial educational multicast), ine paper SA3 form. is". If not, enter "No". For an ex- is paper SA3 form. itating the basis on which your ering "LAC" if your cable system capacity. In payment because it is the subject item or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed. |   |
| ,   | -  | •  | EL LINE-UP  | •   | <u>'</u>   | <del>- </del>                             |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |   |
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| LEGAL NAME OF OWN  | ER OF CABLE SY  | STEM:  |   |  | SYSTEM ID#  |  |
|--|---|--|---|--|---|--|
| Nortex Commu   | nications C   | 0.   |   |  | 5984  | Name                                   |
| PRIMARY TRANSMITTE   | RS: TELEVISIO   | N  |   |  |   |  |
| carried by your cable s  | ystem during th   | ne accounting                                    | period, except  | (1) stations carried   | and low power television stations) d only on a part-time basis under  | G                                      |
| 76.59(d)(2) and (4), 76 substitute program bas                                 | .61(e)(2) and (4<br>sis, as explaine                      | 4), or 76.63 (r<br>d in the next                 | referring to 76.6°<br>paragraph.                              | 1(e)(2) and (4))]; a   | nin network programs [sections nd (2) certain stations carried on a able system on a substitute program   | Primary<br>Transmitters:<br>Television |
|  | here in space   | G—but do lis                                     |   | e Special Stateme  | ent and Program Log)—if the   |  |
| basis. For further in in the paper SA3 for                                     | and also in spa<br>formation conc<br>rm.                  | ce I, if the sta<br>erning substi                | tute basis statio   | ns, see page (v) o   | ute basis and also on some other<br>f the general instructions located  |  |
| each multicast stream  | associated with   | n a station ac                                   | cording to its ov   | er-the-air designat  | s such as HBO, ESPN, etc. Identify ion. For example, report multi-  |  |
| WETA-simulcast).   |   |  |   | ,  | n stream separately; for example on for broadcasting over-the-air in  |  |
| its community of licens<br>on which your cable sy<br><b>Column 3:</b> Indicate | e. For example<br>stem carried th<br>in each case v       | e, WRC is Cha<br>e station.<br>whether the st    | annel 4 in Wash<br>tation is a netwo                          | rk station, an inde  | may be different from the channel pendent station, or a noncommercial   |  |
| (for independent multic<br>For the meaning of the                              | cast), "E" (for no<br>se terms, see p<br>ation is outside | oncommercia<br>page (v) of the<br>the local serv | l educational), o<br>e general instruc<br>vice area, (i.e. "c | r "E-M" (for nonco<br>ctions located in th<br>distant"), enter "Ye | s". If not, enter "No". For an ex-  |  |
| cable system carried the carried the carried the distant stati                 | ne distant statio<br>on on a part-tir                     | on during the<br>ne basis beca                   | accounting perion   | od. Indicate by ento   | tating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject   |  |
| the cable system and a<br>tion "E" (exempt). For s<br>explanation of these th  | a primary transi<br>simulcasts, also<br>ree categories,   | mitter or an a<br>enter "E". If<br>see page (v)  | ssociation repre<br>you carried the o<br>) of the general i   | senting the primar<br>channel on any oth<br>nstructions locate     | tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the |  |
|  | Canadian statio   | ns, if any, giv                                  | e the name of th  | ne community with  | which the station is identifed.   |  |
|  |   | CHANN  | EL LINE-UP  | AJ   |   |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER                            | 3. TYPE<br>OF<br>STATION                         | 4. DISTANT?<br>(Yes or No)                                    | 5. BASIS OF<br>CARRIAGE<br>(If Distant)                            | 6. LOCATION OF STATION  |  |
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| IER OF CABLE SY   | STEM:   |  |  | SYSTEM ID#   |  |
|---|---|--|--|--|--|
|   |   |  |  | 5984   | Name   |
| RS: TELEVISIO   | N   |  |  |  |  |
| G, identify every system during the cons in effect or 6.61(e)(2) and (4.6) is, as explaine stations: With record rules, regular here in space only on a substantial also in spaformation concepts.  | r television st<br>ne accounting<br>n June 24, 19<br>4), or 76.63 (i<br>d in the next<br>respect to any<br>ations, or auth<br>G—but do lis<br>titute basis.   | g period, except<br>181, permitting the<br>referring to 76.6<br>paragraph.<br>y distant stations<br>norizations:<br>at it in space I (the<br>ation was carried   | (1) stations carried the carriage of certain (e)(2) and (4))]; as carried by your case Special Statement both on a substitution.   | d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other   | <b>G</b><br>Primary<br>Transmitters:<br>Television   |
| associated with a care in | n a station ac<br>streams mus<br>per the FCC he, WRC is Cha<br>e station.<br>whether the si<br>etter "N" (for noncommercial<br>page (v) of the<br>the local ster<br>age (v) of the<br>es" in column<br>on during the<br>me basis becomulticast stream<br>or before Jumitter or an a<br>penter "E". If<br>see page (v<br>ch station. For<br>ns, if any, giv  | cording to its over the reported in a cassigned to annel 4 in Wash tation is a network), "N-M" (in a cassing a cassi | er-the-air designal column 1 (list each column 1 (list each column 1) (list each column 1) (list each column 1) (list each column 2) (list each column 3) (list each column 4) (l | tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel upendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast), ne paper SA3 form, sis". If not, enter "No". For an ex- paper SA3 form, stating the basis on which your tering "LAC" if your cable system capacity. payment because it is the subject tem or an association representing y transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. It to which the station is licensed by the which the station is identifed.  |  |
|   | • •   | •  | •  | crianner inte-up.  |  |
| 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
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|   | residentify every system during the fons in effect or 6.61(e)(2) and (6.51s, as explaine stations: With a CC rules, regular there in space only on a subsuand also in spatiformation concurred. The station's call associated with a channel number of the station's call associated the in each case we entering the least), "E" (for me see terms, see pare entered "Ye he distant static ion on a part-tirition of a distant tentered into or a primary transistimulcasts, also are categories e location of ea Canadian station in multiple chart channel.  2. B'CAST CHANNEL | system during the accounting ions in effect on June 24, 19 (a.61(e)(2) and (4), or 76.63 (b.6), as explained in the next stations: With respect to any CC rules, regulations, or auth there in space G—but do lis only on a substitute basis. and also in space I, if the station concerning substitute. The station is call sign. Do not associated with a station accept. Simulcast streams must be channel number the FCC hase. For example, WRC is Chasten carried the station. In each case whether the size terms, see page (v) of the action is outside the local ser ce area, see page (v) of the action is outside the local ser ce area, see page (v) of the action is outside the local ser ce area, see page (v) of the action of a distant multicast streams in column the distant station during the ion on a part-time basis because of a distant multicast streams in column the distant station of a distant multicast streams in column the distant station during the ion of a distant multicast streams in column the distant station during the ion of a distant multicast streams in column the distant station during the ion of a distant multicast streams as includes the local service approach in the case of  | ERS: TELEVISION G, identify every television station (including system during the accounting period, except ions in effect on June 24, 1981, permitting the 3.61(e)(2) and (4), or 76.63 (referring to 76.6 sis, as explained in the next paragraph. Stations: With respect to any distant stations: Or rules, regulations, or authorizations: In here in space G—but do list it in space I (thronly on a substitute basis.  and also in space I, if the station was carried formation concerning substitute basis station associated with a station according to its owner.  The station's call sign. Do not report origination associated with a station according to its owner.  The channel number the FCC has assigned to be channel number the FCC has assigned to be channel number the station.  The channel number the station is a network of the station according to its owner.  The channel number the station is a network of the station is an etwo of the station in the station of the station.  The channel number the station is a network of the station of the general instruction is outside the local service area, (i.e. the carea, see page (v) of the general instruction on a part-time basis because of lack of a station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is not station of a distant multicast stream that is no | ERS: TELEVISION G, identify every television station (including translator stations system during the accounting period, except (1) stations carried ions in effect on June 24, 1981, permitting the carriage of certa 6.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; a sis, as explained in the next paragraph.  Stations: With respect to any distant stations carried by your concording to remain the next paragraph.  Stations: With respect to any distant stations carried by your concording to a substitute basis.  In here in space G—but do list it in space I (the Special Stateme only on a substitute basis.  In here in space I, if the station was carried both on a substitute formation concerning substitute basis stations, see page (v) or imm.  In the station's call sign. Do not report origination program service associated with a station according to its over-the-air designal v-2". Simulcast streams must be reported in column 1 (list each exchannel number the FCC has assigned to the television stations are channel number the station.  In each case whether the station is a network station, an indexident of the station.  In each case whether the station is a network station, an indexident of the station is outside the local service area, (i.e. "distant"), enter "Ye in each case page (v) of the general instructions located in the average of the station during the accounting period. Indicate by ention on a part-time basis because of lack of activated channel of a primary transmitter or an association representing the primar simulcasts, also enter "E". If you carried the channel on any of the primary transmitter or an association representing the primar simulcasts, also enter "E". If you carried the channel on any of the primary transmitter or an association representing the primar simulcasts, also enter "E". If you carried the channel on any of the primary transmitter or an association representing the primary transmitter or an association representing the primary transmitter or an association representing t | Res. TELEVISION  G., identify every television station (including translator stations and low power television stations) system during the accounting period, except (1) stations carried only on a part-time basis under ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections i.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a sis, as explained in the next paragraph.  Stations: With respect to any distant stations carried by your cable system on a substitute program stations: With respect to any distant stations carried by your cable system on a substitute program in space (3)—but do list it in space (4) (the Special Statement and Program Log)—if the only on a substitute basis.  and also in space I, if the station was carried both on a substitute basis and also on some other formation concerning substitute basis stations, see page (v) of the general instructions located rm.  th station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify associated with a station according to its over-the-air designation. For example, report multi-ver. Simulcast streams must be reported in column 1 (list each stream separately; for example exhample, WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station.  The program is a network station, an independent station, or a noncommercial eventering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" cast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast), see terms, see page (v) of the general instructions located in the paper SA3 form.  The search of the search and the station is of accounting period. Indicate by entering "LAC" if your cable system ion on a part-time basis because of lack of activated channel capacity. In the station is of a distant multicast stream that is not subject to a royally payment because it is the subject the enter |

| LEGAL NAME OF OWN   | IER OF CABLE SY   | STEM:  |  |  | SYSTEM ID#   |   |
|---|---|--|--|--|--|---|
| Nortex Commu  |   |  |  |  | 5984   | Namo  |
| PRIMARY TRANSMITTE  | RS: TELEVISIO   | N  |  |  |  |   |
| carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here,   | G, identify every system during the cons in effect or 6.61(e)(2) and (4.6) is, as explaine stations: With record rules, regular here in space only on a substantial also in spaformation concepts.  | r television st<br>ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next<br>respect to any<br>ations, or auth<br>G—but do lis<br>titute basis.  | g period, except<br>181, permitting the<br>referring to 76.6<br>paragraph.<br>y distant stations<br>norizations:<br>at it in space I (the<br>ation was carried   | (1) stations carried the carriage of certain (e)(2) and (4))]; as carried by your case Special Statement both on a substitution.   | and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located  | <b>G</b> Primary  Transmitters:  Television |
| each multicast stream cast stream as "WETA- WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you he cable system carried the carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the | associated with a care in | n a station ac<br>streams musi-<br>per the FCC has been station. Whether the station. Whether the station are the local sendage (v) of the local sendage (v) or before Jumitter or an accenter "E". If a see page (v) of the station. For lons, if any, giv | cording to its over the reported in a cassigned to annel 4 in Wash tation is a network), "N-M" (in a cassing a cassi | er-the-air designal column 1 (list each column 1 (list each column 1) (list each column 1) (list each column 1) (list each column 2) (list each column 3) (list each column 4) (l | s". If not, enter "No". For an expaper SA3 form.  Itating the basis on which your ering "LAC" if your cable system capacity.  Itating the basis on which your ering "LAC" if your cable system capacity.  Italian payment because it is the subject tem or an association representing y transmitter, enter the designation basis, enter "O." For a further d in the paper SA3 form.  It to which the station is licensed by the which the station is identifed. |   |
| Note: If you are dailed   | g manapic onai  |  | EL LINE-UP   | •  | onarmor mile up.   |   |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |   |
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| LEGAL NAME OF OWN  | ER OF CABLE SY                         | STEM:                            |  |  | SYSTEM ID#  |  |  |
|--|--|----------------------------------|--|--|---|--|--|
| Nortex Commu   | nications C                            | 0.                               |  |  | 5984  | Name                                   |  |
| PRIMARY TRANSMITTE   | RS: TELEVISIO                          | N                                |  |  |   |  |  |
| carried by your cable s  | ystem during th                        | ne accounting                    | g period, except                       | (1) stations carried                       | and low power television stations) d only on a part-time basis under ain network programs [sections | G                                      |  |
| 76.59(d)(2) and (4), 76 substitute program bas   | .61(e)(2) and (4<br>sis, as explaine   | 4), or 76.63 (r<br>d in the next | referring to 76.6°<br>paragraph.       | 1(e)(2) and (4))]; a                       | nd (2) certain stations carried on a able system on a substitute program                            | Primary<br>Transmitters:<br>Television |  |
|  | here in space                          | G—but do lis                     |  | e Special Stateme                          | ent and Program Log)—if the   |  |  |
| station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify |  |                                  |  |  |   |  |  |
| each multicast stream  | associated with                        | n a station ac                   | cording to its ov                      | er-the-air designa                         | tion. For example, report multi-  |  |  |
| WETA-simulcast).   |  |                                  |  | •  | n stream separately; for example on for broadcasting over-the-air in                                |  |  |
| on which your cable sy<br>Column 3: Indicate   | stem carried the in each case v        | e station.<br>whether the s      | tation is a netwo                      | rk station, an inde                        | may be different from the channel pendent station, or a noncommercial                               |  |  |
| (for independent multid<br>For the meaning of the  | cast), "E" (for no<br>se terms, see p  | oncommercia<br>page (v) of the   | l educational), o<br>e general instruc | r "E-M" (for nonco<br>ctions located in th | • •   |  |  |
| planation of local servi   | ce area, see pa                        | age (v) of the                   | general instruct                       | ions located in the                        | s". If not, enter "No". For an ex-<br>paper SA3 form.<br>stating the basis on which your            |  |  |
| cable system carried the carried the distant state   | ne distant statio<br>ion on a part-tir | on during the<br>ne basis beca   | accounting perion                      | od. Indicate by ent<br>activated channel o | ering "LAC" if your cable system  |  |  |
| of a written agreement   | entered into or                        | n or before Ju                   | ıne 30, 2009, be                       | tween a cable sys                          | tem or an association representing  |  |  |
| tion "E" (exempt). For s   | simulcasts, also                       | enter "E". If                    | you carried the                        | channel on any ot                          | y transmitter, enter the designa-<br>ner basis, enter "O." For a further                            |  |  |
| Column 6: Give the   | e location of ea                       | ch station. Fo                   | or U.S. stations,                      | list the community                         | d in the paper SA3 form.  to which the station is licensed by the                                   |  |  |
| Note: If you are utilizing   |  |                                  |  | · ·  | which the station is identifed.<br>channel line-up.   |  |  |
|  |  | CHANN                            | EL LINE-UP                             | AM   |   |  |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER         | 3. TYPE<br>OF<br>STATION         | 4. DISTANT?<br>(Yes or No)             | 5. BASIS OF<br>CARRIAGE<br>(If Distant)    | 6. LOCATION OF STATION  |  |  |
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| ER OF CABLE SY   | STEM:   |  |  | SYSTEM ID#   |  |
|--|---|--|--|--|--|
|  |   |  |  |  | Name   |
| RS: TELEVISIO  | N   |  |  |  |  |
| G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explaine stations: With r CC rules, regular here in space only on a substand also in spaformation concerns.   | r television st<br>ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next<br>respect to any<br>ations, or auth<br>G—but do lis<br>titute basis.   | g period, except<br>181, permitting the<br>referring to 76.6<br>paragraph.<br>y distant stations<br>norizations:<br>at it in space I (the<br>ation was carried   | (1) stations carried the carriage of certain (e)(2) and (4))]; as carried by your case Special Statement both on a substitution.   | d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other   | <b>G</b> Primary  Transmitters:  Television  |
| associated with a second case with a second case we entering the least), "E" (for not experted in southing the cast), "E" (for not experted in southing the least), "E" (for not experted in the least), and it is a primary transition of a distant entered into or a primary transition in the least experted in the least experte | n a station ac<br>streams musi-<br>per the FCC has, WRC is Challe station.<br>whether the sister "N" (for noncommercial<br>page (v) of the the local sen-<br>age (v) of the ses" in column<br>on during the me basis becamulticast stream or before Ju-<br>mitter or an account of the service of the station. For the station. For the stream of the service of the station. For the stream of the station. For the station is stream of the station. For the station is stream of the station. For the station is stream of the station is stream of the station. For the station is stream of the stream | cording to its over the reported in a cassigned to annel 4 in Wash tation is a network), "N-M" (in a cassing a cassi | er-the-air designal column 1 (list each column 1 (list each column 1) (list each column 1) (list each column 1) (list each column 2) (list each column 3) (list each column 4) (l | tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel upendent station, or a noncommercial ast), "I" (for independent), "I-M" mmercial educational multicast). The paper SA3 form. The p |  |
| -  | • •   | •  | •  | ·  | <u> </u>   |
| 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |  |
|  |   |  |  |  |  |
|  | restrictions Ciercian de la companyation de la comp                      | system during the accounting ions in effect on June 24, 19 (a.61(e)(2) and (4), or 76.63 (b.6), as explained in the next stations: With respect to any CC rules, regulations, or auth there in space G—but do lis only on a substitute basis. and also in space I, if the station concerning substitute. The station is call sign. Do not associated with a station accept. Simulcast streams must be channel number the FCC hase. For example, WRC is Chasten carried the station. In each case whether the size terms, see page (v) of the action is outside the local ser ce area, see page (v) of the action is outside the local ser ce area, see page (v) of the action is outside the local ser ce area, see page (v) of the action of a distant multicast streams in column the distant station during the ion on a part-time basis because of a distant multicast streams in column the distant station of a distant multicast streams in column the distant station during the ion of a distant multicast streams in column the distant station during the ion of a distant multicast streams in column the distant station during the ion of a distant multicast streams as includes the local service approach in the case of  | ERS: TELEVISION G, identify every television station (including system during the accounting period, except ions in effect on June 24, 1981, permitting the 3.61(e)(2) and (4), or 76.63 (referring to 76.6 sis, as explained in the next paragraph. Stations: With respect to any distant stations: Or rules, regulations, or authorizations: In here in space G—but do list it in space I (thronly on a substitute basis.  and also in space I, if the station was carried formation concerning substitute basis station associated with a station according to its owner.  The station's call sign. Do not report origination associated with a station according to its owner.  The channel number the FCC has assigned to be channel number the FCC has assigned to be channel number the station.  The channel number the station is a network of the station according to its owner.  The channel number the station is a network of the station is an etwo of the station in the station of the station.  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Stations: With respect to any distant stations carried by your concording to remain the remaining of the policy of the special Stateme only on a substitute basis.  In here in space G—but do list it in space I (the Special Stateme only on a substitute basis.  In here in space I, if the station was carried both on a substitute formation concerning substitute basis stations, see page (v) or  | Inications Co.  1984  1985: TELEVISION  25, identify every television station (including translator stations and low power television stations) system during the accounting period, except (1) stations carried only on a part-time basis under ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions in effect on June 24, 1981, permitting the carriage of certain network programs [sections ions in effect on June 24, 1981, permitting in the ions in stations carried on a sis, as explained in the next paragraph.  1007 Interest with respect to any distant stations carried by your cable system on a substitute program in section in space I, if the station search of the substitute program is explained in substitute basis.  1018 Interest in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis.  1019 Interest in space G—but do list it in space I (the Special Statement and Program Log)—if the only on a substitute basis.  1019 Interest in space I, if the station was carried both on a substitute basis and also on some other formation concerning substitute basis stations, see page (v) of the general instructions located from the station in space I, if the station according to its over-the-air designation. For example, export multi-ver. Simulcast streams must be reported in column 1 (list each stream separately; for example was treated in the patent station, or a noncommercial example. WRC is Channel 4 in Washington, D.C. This may be different from the channel stem carried the station.  1019 Interest in the station is a network station, an independent station, or a noncommercial educational por "E-M" (for noncommercial educational multicast). Interest in |

| LEGAL NAME OF OWN  | ER OF CABLE SY                    | STEM:             |                   |                          | SYSTEM ID#   |  |  |  |
|--|-----------------------------------|-------------------|-------------------|--------------------------|--|--|--|--|
| Nortex Commu   |                                   |                   |                   |                          | 5984   | Name                                   |  |  |
| PRIMARY TRANSMITTE   |                                   |                   |                   |                          |  |  |  |  |
| In General: In space G   | G, identify every                 | television st     | , ,               |                          | and low power television stations)<br>d only on a part-time basis under  | G                                      |  |  |
| •  |                                   |                   |                   | •                        | ain network programs [sections   |  |  |  |
| substitute program bas   | sis, as explaine                  | d in the next     | paragraph.        |                          | nd (2) certain stations carried on a able system on a substitute program | Primary<br>Transmitters:<br>Television |  |  |
| basis under specific FCC rules, regulations, or authorizations:  |                                   |                   |                   |                          |  |  |  |  |
| • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. |                                   |                   |                   |                          |  |  |  |  |
| List the station here,   | and also in spa<br>formation cond | ice I, if the sta |                   |                          | ute basis and also on some other<br>f the general instructions located   |  |  |  |
|  |                                   | sign. Do not      | report originatio | n program service:       | s such as HBO, ESPN, etc. Identify                                       |  |  |  |
|  |                                   |                   | -                 | _                        | tion. For example, report multi-   |  |  |  |
| WETA-simulcast).   | -2 . Simulcast                    | sireams mus       | t be reported in  | column i (list eaci      | n stream separately; for example   |  |  |  |
|  |                                   |                   |                   |                          | on for broadcasting over-the-air in<br>may be different from the channel |  |  |  |
| on which your cable sy   | stem carried th                   | e station.        |                   |                          | •  |  |  |  |
|  |                                   |                   |                   |                          | pendent station, or a noncommercial ast), "I" (for independent), "I-M"   |  |  |  |
|  |                                   |                   |                   |                          | mmercial educational multicast).   |  |  |  |
| For the meaning of the<br>Column 4: If the sta   |                                   | • ,               | •                 |                          | ie paper SA3 form.<br>s". If not, enter "No". For an ex-                 |  |  |  |
| planation of local servi   | ce area, see pa                   | age (v) of the    | general instruct  | ions located in the      | paper SA3 form.  |  |  |  |
| 1  |                                   |                   | -                 | <u>=</u> "               | stating the basis on which your<br>ering "LAC" if your cable system      |  |  |  |
| carried the distant stati  |                                   | -                 |                   | •                        |  |  |  |  |
|  |                                   |                   |                   |                          | payment because it is the subject tem or an association representing     |  |  |  |
| -  |                                   |                   |                   | •                        | y transmitter, enter the designa-  |  |  |  |
| ` ' '  |                                   |                   | •                 | •                        | her basis, enter "O." For a further                                      |  |  |  |
|  | -                                 |                   |                   |                          | d in the paper SA3 form.<br>to which the station is licensed by the      |  |  |  |
|  |                                   | . ,               |                   | •                        | which the station is identifed.  |  |  |  |
| Note: If you are utilizin  | g multiple char                   |                   | •                 | •                        | channel line-up.   |  |  |  |
|  | 1                                 | CHANN             | EL LINE-UP        | AU                       | 1  |  |  |  |
| 1. CALL  | 2. B'CAST                         | 3. TYPE           | 4. DISTANT?       | 5. BASIS OF              | 6. LOCATION OF STATION   |  |  |  |
| SIGN   | CHANNEL<br>NUMBER                 | OF<br>STATION     | (Yes or No)       | CARRIAGE<br>(If Distant) |  |  |  |  |
|  | NOWIDER                           | STATION           |                   | (II Distailt)            |  |  |  |  |
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| LEGAL NAME OF OWN   | IER OF CABLE SY  | STEM:  |  |   | SYSTEM ID#   |   |
|---|--|--|--|---|--|---|
| Nortex Commu  |  |  |  |   | 5984   | Name  |
| PRIMARY TRANSMITTE  | RS: TELEVISIO  | N  |  |   |  |   |
| In General: In space (carried by your cable s FCC rules and regulat 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried  | G, identify every system during the ions in effect or 6.61(e)(2) and (4 sis, as explaine stations: With r CC rules, regular here in space only on a substation as substati | r television st<br>ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next<br>respect to any<br>ations, or auth<br>G—but do lis<br>titute basis.  | g period, except<br>181, permitting th<br>referring to 76.6°<br>paragraph.<br>y distant stations<br>norizations:<br>ti ti in space I (th   | (1) stations carried<br>ne carriage of certa<br>1(e)(2) and (4))]; a<br>s carried by your ca<br>ne Special Stateme  | and low power television stations) d only on a part-time basis under ain network programs [sections nd (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other  | G<br>Primary<br>Transmitters:<br>Television |
| basis. For further in in the paper SA3 for Column 1: List each each multicast stream cast stream as "WETA-Simulcast).  Column 2: Give the its community of licens   | oformation concurrent.  In station's call associated with a-2". Simulcast be channel number.   | erning substingsign. Do not to a station ac streams must be the FCC he, WRC is Ch  | tute basis station report origination cording to its over the reported in the cordinal assigned to the cordinal assigned to the cordinal cordinal assigned to the cordinal assigned to the cordinal assigned to the cordinal cordinal assigned to the cordinal cordinal assigned to the cordinal co | ns, see page (v) o<br>n program service:<br>er-the-air designal<br>column 1 (list each<br>the television stati  | f the general instructions located s such as HBO, ESPN, etc. Identify tion. For example, report multi- n stream separately; for example on for broadcasting over-the-air in may be different from the channel  |   |
| educational station, by (for independent multic For the meaning of the Column 4: If the st planation of local servi Column 5: If you h cable system carried th carried the distant stat For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For explanation of these th Column 6: Give the | e in each case we rentering the le cast), "E" (for no ese terms, see pation is outside for earea, see parave entered "Ye he distant static ion on a part-tirision of a distant entered into or a primary transisimulcasts, also aree categories, e location of ea Canadian statio  | whether the sitter "N" (for noncommercial or the local services of the local services in column or during the me basis becamulticast stranor before Jumitter or an accenter "E". If a see page (vich station. Forns, if any, giv | etwork), "N-M" (in educational), of e general instruct vice area, (i.e. "or general instruct 4, you must correct accounting per ause of lack of a earn that is not a sune 30, 2009, be a sociation repreyou carried the or U.S. stations, we the name of the   | for network multica<br>or "E-M" (for nonco<br>ctions located in the<br>distant"), enter "Ye<br>ions located in the<br>mplete column 5, s<br>od. Indicate by ent<br>activated channel of<br>subject to a royalty<br>stween a cable sys<br>senting the primar<br>channel on any ott<br>instructions locate<br>list the community<br>me community with | s". If not, enter "No". For an expaper SA3 form.  Itating the basis on which your ering "LAC" if your cable system capacity.  Itating the basis on which your ering "LAC" if your cable system capacity.  Italian payment because it is the subject tem or an association representing y transmitter, enter the designation basis, enter "O." For a further d in the paper SA3 form.  It to which the station is licensed by the which the station is identifed. |   |
|   |  | CHANN  | EL LINE-UP   | AP  |  |   |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)   | 6. LOCATION OF STATION   |   |
|   |  |  |  |   |  |   |
|   |  | <u></u>  |  |   |  |   |

| LEGAL NAME OF OWN  | ER OF CABLE SY  | STEM:  |   |  | SYSTEM ID#  |   |
|--|---|--|---|--|---|---|
| Nortex Commu   |   |  |   |  | 5984  | Name  |
| PRIMARY TRANSMITTE   | RS: TELEVISIO   | N  |   |  |   |   |
| carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here,   | G, identify every ystem during the ons in effect or .61(e)(2) and (4 sis, as explaine stations: With r CC rules, regular here in space only on a substand also in spaformation concerns.  | r television st<br>ne accounting<br>n June 24, 19<br>4), or 76.63 (r<br>d in the next<br>respect to any<br>ations, or auth<br>G—but do lis<br>titute basis.  | g period, except<br>81, permitting th<br>referring to 76.6'<br>paragraph.<br>distant stations<br>rorizations:<br>t it in space I (th<br>ation was carried   | (1) stations carried be carriage of certain (e)(2) and (4))]; as carried by your case Special Statemed both on a substit   | and low power television stations) d only on a part-time basis under ain network programs [sections and (2) certain stations carried on a able system on a substitute program ent and Program Log)—if the ute basis and also on some other f the general instructions located | <b>G</b> Primary  Transmitters:  Television |
| column 1: List eace each multicast stream cast stream as "WETA WETA-simulcast).  column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the stiplanation of local servi Column 5: If you had cable system carried the distant stat. For the retransmiss of a written agreement | h station's call associated with associated with a cream least of the control of | n a station ac<br>streams musi-<br>per the FCC has a consideration. Whether the station,<br>whether the station and the concommercial<br>page (v) of the the local serving (v) of the local serving (v) of the loss in column on during the me basis because multicast stream or before Ju | cording to its over the reported in a case assigned to a cannel 4 in Wash tation is a network ("N-M" ("I of the reported in a case and instruct 4, you must confuse accounting period ause of lack of a cam that is not sine 30, 2009, be | the television statington, D.C. This ork station, an indefor network multication slocated in the distant"), enter "Ye ions located in the mplete column 5, sod. Indicate by entactivated channel of subject to a royalty stween a cable systems. | s". If not, enter "No". For an ex- paper SA3 form. stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject tem or an association representing  |   |
| tion "E" (exempt). For sexplanation of these the   | simulcasts, also<br>ree categories<br>e location of ea<br>Canadian statio   | o enter "E". If<br>, see page (v)<br>ch station. Fo<br>ns, if any, giv<br>nnel line-ups,   | you carried the or you carried the or of the general in U.S. stations, e the name of the  | channel on any ott<br>instructions locate<br>list the community<br>ne community with<br>space G for each   | y transmitter, enter the designa-<br>ner basis, enter "O." For a further<br>d in the paper SA3 form. It to which the station is licensed by the<br>which the station is identifed.<br>channel line-up.  |   |
|  | o Digage  |  |   |  |   | †   |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)  | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |   |
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| LEGAL NAME OF OWN   | ER OF CABLE SY  | STEM:  |  |  | SYSTEM ID#   |   |
|---|---|--|--|--|--|---|
| Nortex Commu  | nications C   | 0.   |  |  | 5984   | Name  |
| PRIMARY TRANSMITTE  | RS: TELEVISIO   | N  |  |  |  |   |
| In General: In space G carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here,   | G, identify every ystem during the ons in effect or .61(e)(2) and (4 isis, as explaine tations: With r C rules, regular here in space only on a substand also in spaformation conc  | television stare accounting a June 24, 194, or 76.63 (r d in the next pespect to any tions, or auth G—but do list itute basis.   | period, except<br>81, permitting the<br>eferring to 76.6°<br>paragraph.<br>distant stations<br>eorizations:<br>t it in space I (the<br>ation was carried   | (1) stations carried the carriage of certain (e)(2) and (4))]; and carried by your case Special Statemed both on a substitution of carried on a substitution on a substitution of carried on a substitution on a substitu | and low power television stations) d only on a part-time basis under hin network programs [sections and (2) certain stations carried on a hable system on a substitute program hent and Program Log)—if the hute basis and also on some other of the general instructions located  | <b>G</b> Primary  Transmitters:  Television |
| each multicast stream cast stream as "WETA WETA-simulcast). Column 2: Give the its community of licens on which your cable sy Column 3: Indicate educational station, by (for independent multic For the meaning of the Column 4: If the sta planation of local servi Column 5: If you ha cable system carried th carried the distant stati For the retransmiss of a written agreement the cable system and a tion "E" (exempt). For s explanation of these th Column 6: Give the | associated with -2". Simulcast: channel numb e. For example stem carried th in each case v entering the le cast), "E" (for no se terms, see p ation is outside ce area, see pe ave entered "Ye ne distant static on on a part-tir ion of a distant entered into or a primary transi simulcasts, also ree categories, e location of eace canadian statio | n a station accepted as a station accepted as a station accepted as a station.  Whether the station accepted as a station. For an accepted as a station accepted accepted as a station accepted as a s | cording to its over the reported in or the reported in the r | er-the-air designate column 1 (list each the television station of the television station of the television of television of the television of the television of the television of television of the television of television of the television of the television of the television of televis | s". If not, enter "No". For an expaper SA3 form. tating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject tem or an association representing y transmitter, enter the designater basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the which the station is identifed. |   |
| •   |   | CHANN  | EL LINE-UP   | AR   | ·  | 1   |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER  | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION   |   |
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| LEGAL NAME OF OWN  | ER OF CABLE SY                 | STEM:                    |                            |   | SYSTEM ID#  |      |  |
|--|--------------------------------|--------------------------|----------------------------|---|---|------|--|
| Nortex Commu   |                                |                          |                            |   | 5984  | Namo |  |
| PRIMARY TRANSMITTE   | RS: TELEVISIO                  | N                        |                            |   |   |      |  |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the  |                                |                          |                            |   |   |      |  |
| station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station our a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2 |                                |                          |                            |   |   |      |  |
| FCC. For Mexican or C Note: If you are utilizin  |                                | nnel line-ups,           |                            | space G for each                        | which the station is identifed.<br>channel line-up. |      |  |
|  | o Digage                       |                          |                            | -                                       | a LOGATION OF STATION                               |      |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE<br>OF<br>STATION | 4. DISTANT?<br>(Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION                              |      |  |
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| LEGAL NAME OF OWN  | ER OF CABLE SY  | STEM:   |   |  | SYSTEM ID#   |      |  |  |
|--|---|---|---|--|--|------|--|--|
| Nortex Commu   | nications C   | 0.  |   |  | 5984   | Name |  |  |
| PRIMARY TRANSMITTERS: TELEVISION   |   |   |   |  |  |      |  |  |
| carried by your cable s  | ystem during th   | ne accounting                                     | period, except  | (1) stations carried   | and low power television stations) d only on a part-time basis under   | G    |  |  |
| FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program  |   |   |   |  |  |      |  |  |
| basis under specifc FC   | CC rules, regula  | tions, or auth                                    | orizations:   |  | ent and Program Log)—if the  |      |  |  |
| basis. For further in in the paper SA3 fo  | and also in spa<br>formation conc<br>rm.                  | ce I, if the sta<br>erning substit                | tute basis statio   | ns, see page (v) o   | ute basis and also on some other f the general instructions located  |      |  |  |
| each multicast stream  | associated with   | n a station ac                                    | cording to its ov   | er-the-air designat  | s such as HBO, ESPN, etc. Identify tion. For example, report multi-  |      |  |  |
| WETA-simulcast).   |   |   |   | ,  | n stream separately; for example on for broadcasting over-the-air in   |      |  |  |
| its community of licens<br>on which your cable sy<br><b>Column 3:</b> Indicate   | e. For example<br>stem carried the<br>in each case v      | e, WRC is Cha<br>e station.<br>whether the st     | annel 4 in Wash<br>tation is a netwo                          | rk station, an inde  | may be different from the channel pendent station, or a noncommercial  |      |  |  |
| (for independent multic<br>For the meaning of the  | cast), "E" (for no<br>se terms, see p<br>ation is outside | oncommercial<br>page (v) of the<br>the local serv | l educational), o<br>e general instruc<br>vice area, (i.e. "c | r "E-M" (for nonco<br>ctions located in th<br>distant"), enter "Ye | s". If not, enter "No". For an ex-   |      |  |  |
| cable system carried the carried the distant stati   | ne distant statio<br>ion on a part-tir                    | on during the a                                   | accounting perion   | od. Indicate by ento   | stating the basis on which your ering "LAC" if your cable system capacity. payment because it is the subject |      |  |  |
| of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three categories, see page (v) of the general instructions located in the paper SA3 form.  Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed. |   |   |   |  |  |      |  |  |
| Note: If you are utilizin  | 3   |   | EL LINE-UP  |  |  |      |  |  |
| 1. CALL<br>SIGN  | 2. B'CAST<br>CHANNEL<br>NUMBER                            | 3. TYPE<br>OF<br>STATION                          | 4. DISTANT?<br>(Yes or No)                                    | 5. BASIS OF<br>CARRIAGE<br>(If Distant)                            | 6. LOCATION OF STATION   |      |  |  |
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| LEGAL NAME OF OWN   | ER OF CABLE SY   | STEM:   |  |  | SYSTEM ID#  |      |  |
|---|--|---|--|--|---|------|--|
| Nortex Commu  | nications C  | 0.  |  |  | 5984  | Name |  |
| PRIMARY TRANSMITTE  | RS: TELEVISIO  | N   |  |  |   |      |  |
| In General: In space C carried by your cable s  | 6, identify every                                      | television st                                       | g period, except   | (1) stations carrie  | and low power television stations) d only on a part-time basis under  | G    |  |
| FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program |  |   |  |  |   |      |  |
| basis under specifc FC  | CC rules, regula                                       | itions, or auth                                     | norizations:   |  | ent and Program Log)—if the   |      |  |
| basis. For further in in the paper SA3 fo   | and also in spa<br>formation cond<br>rm.               | ice I, if the sta<br>erning substi                  | tute basis statio  | ns, see page (v) o   | ute basis and also on some other<br>f the general instructions located  |      |  |
|   |  | -   |  |  | s such as HBO, ESPN, etc. Identify<br>tion. For example, report multi-  |      |  |
| WETA-simulcast).  |  |   | ·  | •  | n stream separately; for example on for broadcasting over-the-air in  |      |  |
| on which your cable sy<br>Column 3: Indicate  | stem carried the in each case w                        | e station.<br>whether the st                        | tation is a netwo  | ork station, an inde   | may be different from the channel ependent station, or a noncommercial east), "I" (for independent), "I-M"                                |      |  |
| (for independent multid<br>For the meaning of the   | cast), "E" (for no<br>se terms, see                    | oncommercia<br>page (v) of the                      | il educational), c<br>e general instru                   | or "E-M" (for nonco  | mmercial educational multicast).  |      |  |
| -   | ave entered "Ye  | es" in column                                       | 4, you must cor  | mplete column 5,   | e paper SA3 form.<br>stating the basis on which your<br>ering "LAC" if your cable system  |      |  |
|   | ion of a distant                                       | multicast stre                                      | eam that is not s  | subject to a royalty   | capacity.  payment because it is the subject stem or an association representing  |      |  |
| tion "E" (exempt). For sexplanation of these the  | simulcasts, also<br>ree categories<br>e location of ea | o enter "E". If<br>, see page (v)<br>ch station. Fo | you carried the<br>) of the general<br>or U.S. stations, | channel on any ot<br>instructions locate<br>list the community | ry transmitter, enter the designa- her basis, enter "O." For a further d in the paper SA3 form. y to which the station is licensed by the |      |  |
| <b>Note:</b> If you are utilizin  |  |   |  | -  | which the station is identifed. channel line-up.  |      |  |
| ,   | <u> </u>   | CHANN   | EL LINE-UP   | AU   |   |      |  |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER                         | 3. TYPE<br>OF<br>STATION                            | 4. DISTANT?<br>(Yes or No)                               | 5. BASIS OF<br>CARRIAGE<br>(If Distant)                        | 6. LOCATION OF STATION  |      |  |
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| LEGAL NAME OF OWN   | ER OF CABLE SY   | STEM:  |  |  | SYSTEM ID#  |            |  |
|---|--|--|--|--|---|------------|--|
| Nortex Commu  | nications C  | 0.   |  |  | 5984  | Name       |  |
| PRIMARY TRANSMITTE  | RS: TELEVISIO  | N  |  |  |   |            |  |
| In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under  |  |  |  |  |   |            |  |
| FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program |  |  |  |  |   |            |  |
| basis under specifc FC  | CC rules, regula<br>here in space  | itions, or auth<br>G—but do lis                                      | orizations:  |  | ent and Program Log)—if the   | Television |  |
| List the station here, a  | and also in spa<br>formation conc  | ce I, if the sta   |  |  | ute basis and also on some other<br>f the general instructions located  |            |  |
| Column 1: List eac each multicast stream  | h station's call<br>associated with  | n a station ac   | cording to its ov  | er-the-air designat  | s such as HBO, ESPN, etc. Identify<br>ion. For example, report multi-<br>a stream separately; for example   |            |  |
| Column 2: Give the  | e. For example   | , WRC is Ch  | -  |  | on for broadcasting over-the-air in<br>may be different from the channel  |            |  |
| educational station, by<br>(for independent multic<br>For the meaning of the<br><b>Column 4:</b> If the sta   | entering the le<br>east), "E" (for no<br>se terms, see p<br>ation is outside | tter "N" (for no<br>oncommercia<br>page (v) of the<br>the local serv | etwork), "N-M" (i<br>I educational), o<br>e general instruc<br>vice area, (i.e. "c | for network multica<br>or "E-M" (for nonco<br>ctions located in th<br>distant"), enter "Ye | s". If not, enter "No". For an ex-  |            |  |
| cable system carried the carried the carried the distant stati  | ave entered "Ye<br>ne distant statio<br>on on a part-tir                     | es" in column<br>on during the<br>ne basis beca                      | 4, you must cor<br>accounting perion<br>ause of lack of a                          | mplete column 5, s<br>od. Indicate by ento<br>activated channel c                          | tating the basis on which your<br>ering "LAC" if your cable system  |            |  |
| the cable system and a<br>tion "E" (exempt). For s<br>explanation of these th   | a primary transi<br>simulcasts, also<br>ree categories,                      | mitter or an a<br>enter "E". If<br>see page (v)                      | ssociation repre<br>you carried the o<br>) of the general i                        | senting the primar<br>channel on any oth<br>instructions located                           | tem or an association representing y transmitter, enter the designa- ner basis, enter "O." For a further d in the paper SA3 form. to which the station is licensed by the |            |  |
|   | Canadian statio  | ns, if any, giv  | e the name of th   | ne community with  | which the station is identifed.   |            |  |
|   |  | CHANN  | EL LINE-UP   | AV   |   |            |  |
| 1. CALL<br>SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER   | 3. TYPE<br>OF<br>STATION   | 4. DISTANT?<br>(Yes or No)   | 5. BASIS OF<br>CARRIAGE<br>(If Distant)  | 6. LOCATION OF STATION  |            |  |
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| LEGAL NAME OF OWN  | ER OF CABLE SY                 | STEM:              |                         |   | SYSTEM ID#             | !    |
|--|--------------------------------|--------------------|-------------------------|---|------------------------|------|
| Nortex Commu   |                                |                    |                         |   | 5984                   | Namo |
| PRIMARY TRANSMITTE   | RS: TELEVISIO                  | N                  |                         |   |                        |      |
| PRIMARY TRANSMITTERS: TELEVISION  In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.  Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specifc FCC rules, regulations, or authorizations:  • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.  • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.  Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify   |                                |                    |                         |   |                        |      |
| each multicast stream associated with a station according to its over-the-air designation. For example, report multicast stream as "WETA-2". Simulcast streams must be reported in column 1 (list each stream separately; for example WETA-simulcast).  Column 2: Give the channel number the FCC has assigned to the television station for broadcasting over-the-air in its community of license. For example, WRC is Channel 4 in Washington, D.C. This may be different from the channel on which your cable system carried the station.  Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast).  For the meaning of these terms, see page (v) of the general instructions located in the paper SA3 form.  Column 4: If the station is outside the local service area, (i.e. "distant"), enter "Yes". If not, enter "No". For an explanation of local service area, see page (v) of the general instructions located in the paper SA3 form.  Column 5: If you have entered "Yes" in column 4, you must complete column 5, stating the basis on which your cable system carried the distant station during the accounting period. Indicate by entering "LAC" if your cable system carried the distant station on a part-time basis because of lack of activated channel capacity.  For the retransmission of a distant multicast stream that is not subject to a royalty payment because it is the subject of a written agreement entered into on or before June 30, 2009, between a cable system or an association representing the cable system and a primary transmitter or an association representing the primary transmitter, enter the designation "E" (exempt). For simulcasts, also enter "E". If you carried the channel on any other basis, enter "O." For a further explanation of these three c |                                |                    |                         |   |                        |      |
|  |                                | CHANN              | EL LINE-UP              | AW                                      |                        |      |
| 1. CALL SIGN   | 2. B'CAST<br>CHANNEL<br>NUMBER | 3. TYPE OF STATION | 4. DISTANT? (Yes or No) | 5. BASIS OF<br>CARRIAGE<br>(If Distant) | 6. LOCATION OF STATION |      |

ACCOUNTING PERIOD: 2024/1 FORM SA3E, PAGE 4.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 5984 Nortex Communications Co. PRIMARY TRANSMITTERS: RADIO Н In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were "generally receivable" by your cable system during the accounting period. **Primary** Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally Transmitters: receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, Radio on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the the Copyright Office regulations on this point, see page (vi) of the general instructions located in the paper SA3 form. Column 1: Identify the call sign of each station carried. Column 2: State whether the station is AM or FM. Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column. Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified). CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM LOCATION OF STATION S/D **KGAF** FΜ **GAINESVILLE, TX** 

| SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOS  In General: In gape 1, identify every prometations television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former PCC rules, regulations, or authorizations. For a further substitute basis during the accounting period, during the size of this log, see page (y) of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from Armonic Poly of the general instructions located in the paper SA3 from for further information. Do not use general categories like "howevier," or "basketbat" in the paper SA3 from for further information. Do not use general categories like "howevier," or "basketbat" in the paper SA3 from for further information. Do not use general categories like "howevier," or "basketbat" in the paper SA3 from for further information. Do not use general categories like "howevier," or "basketbat" in the paper SA3 from for further information. Do not use general categories like "howevier," or "basketbat" in the paper SA3 from for further information. Do not use general categories like "howevier," or "basketbat program was carried by a system from the state in the flow."  Column 5. Give the call sign of the station in strong-timp in the substitute program. Use nume | FORM SA3E. PAGE 5.  |   |   |   |   |   | ACCOUNTING | PERIOD: 2024/1 |  |  |
|--|---|---|---|---|---|---|------------|----------------|--|--|
| SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG  In General: In space I, identify every nonnetwork television program broadcast by a distant station that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions located in the paper SA3 form L SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  - During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program bodie in block 2.  2. LOG OF SUBSTITUTE PROGRAMS  In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.  Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (vi) of the general instructions located in the paper SA3 form for futher information. Do not use general categories like "movies", or "basketball". List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls."  Column 2: Give the program was broadcast live, enter "Yes." Otherwise enter "No."  Column 3: Give the roadiast stations in fany, the community with which the station is identified).  Column 6: State the times when the substitute program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period, enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect during the accounting period, enter the letter "P" if the listed program was substituted for  | LEGAL NAME OF OWNER OF  | CABLE SYST  | EM:   |   |   | •   | SYSTEM ID# | NI             |  |  |
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| Column 3: Give the call sign of the station broadcasting the substitute program.  Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).  Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7."  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m."  Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.  SUBSTITUTE PROGRAM  2. LIVE? 3. STATION'S  The interval of the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community to which the station is identified).  Column 5: Given the month and day when your system carried by substitute program. Use numerals, with the month first. Because of Canadian stations is identified).  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest, with the month first. Because of Call Station is identified).  Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes, with the month first. Because of Call Station is identified).  Column 6: State the times when the substitute program. Use numerals, with the month  | clear. If you need more spa-<br>Column 1: Give the title of<br>period, was broadcast by a<br>under certain FCC rules, re-                 | ce, please a<br>of every nor<br>distant stati<br>gulations, o | attach addition<br>nnetwork televi<br>on and that yo<br>r authorization | al pages.<br>sion program (substitute p<br>ur cable system substituted<br>s. See page (vi) of the gen | rogram) that,<br>d for the prog<br>eral instruction | during the accounting<br>ramming of another sta | ation      |                |  |  |
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| to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.    WHEN SUBSTITUTE   SUBSTITUTE   CARRIAGE OCCURRED   FOR DELETION   Substitute of the listed pro gram was substituted for programming that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976.   |   | er "R" if the   | listed program  | was substituted for progra  | mming that y  | our system was require                          | ed         |                |  |  |
| effect on October 19, 1976.  SUBSTITUTE PROGRAM  1. TITLE OF PROGRAM  2. LIVE? 3. STATION'S  WHEN SUBSTITUTE CARRIAGE OCCURRED FOR DELETION  | to delete under FCC rules a   | nd regulation   | ons in effect du  | iring the accounting period   | ; enter the le                                      | tter "P" if the listed pro                      | -          |                |  |  |
| SUBSTITUTE PROGRAM  1. TITLE OF PROGRAM  2. LIVE? 3. STATION'S  CARRIAGE OCCURRED  7. REASON FOR DELETION  |   | ogramming   | that your syste   | em was permitted to delete  | under FCC i   | ules and regulations in                         |            |                |  |  |
| SUBSTITUTE PROGRAM  1. TITLE OF PROGRAM  2. LIVE? 3. STATION'S  CARRIAGE OCCURRED  7. REASON FOR DELETION  |   |   |   |   | \/\L  | EN STIRSTITLITE                                 |            |                |  |  |
| 1. TITLE OF PROGRAM 2. LIVE? 3. STATION'S 5. MONTH 6. TIMES DELETION   | S   | UBSTITUT  | E PROGRAM   |   |   |   |            |                |  |  |
| Company  | 1. TITLE OF PROGRAM   |   |   | 4. STATION'S LOCATION   |   |   |            |                |  |  |
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ACCOUNTING PERIOD: 2024/1 FORM SA3E. PAGE 6.

|                                   | LEGAL NAME OF (   | OWNER OF CABLE  | SYSTEM:        |              |      |               |        |                | SYSTEM ID# |
|-----------------------------------|---|-----------------|----------------|--------------|------|---------------|--------|----------------|------------|
| Name                              | Nortex Com  | munications     | Co.            |              |      |               |        |                | 5984       |
| J<br>Part-Time<br>Carriage<br>Log | In General: This space ties in with column 5 of space G. If you listed a station's basis of carriage as "LAC" for part-time carriage due to lack of activated channel capacity, you are required to complete this log giving the total dates and hours your system carried that station. If you need more space, please attach additional pages.  Column 1 (Call sign): Give the call sign of every distant station whose basis of carriage you identified by "LAC" in column 5 of space G.  Column 2 (Dates and hours of carriage): For each station, list the dates and hours when part-time carriage occurred during the accounting period.  Give the month and day when the carriage occurred. Use numerals, with the month first. Example: for April 10 give "4/10."  State the starting and ending times of carriage to the nearest quarter hour. In any case where carriage ran to the end of the television station's broadcast day, you may give an approximate ending hour, followed by the abbreviation "app." Example: "12:30 a.m.— 3:15 a.m. app."  You may group together any dates when the hours of carriage were the same. Example: "5/10-5/14, 6:00 p.m.— 12:00 p.m." |                 |                |              |      |               |        |                |            |
|                                   |   |                 | DAT            | ES AND HOURS | OF F | PART-TIME CAR | RIAGE  |                |            |
|                                   |   | \ <b>\</b> /\LE | ALCARRIACE OC  | CLIDDED      |      |               | ١٨/١١٢ | ALCARRIAGE OCC | NIDDED     |
|                                   | CALL SIGN   | VVIICI          | N CARRIAGE OCO | URS          |      | CALL SIGN     | VVITEI | N CARRIAGE OCC | JRS        |
|                                   |   | DATE            | FROM           | ТО           |      |               | DATE   | FROM           | TO         |
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|                                   |   |                 |                |              | -    |               |        | -              |            |
|                                   |   |                 |                |              | -    |               |        | -              | _          |
|                                   |   |                 |                |              |      |               |        | -              | _          |
|                                   |   |                 |                |              |      |               |        | -              |            |

|   | NAME OF OWNER OF CABLE SYSTEM:   |                     | SYSTEM ID#      |   |  |  |  |
|---|--|---------------------|-----------------|---|--|--|--|
| Nor   | tex Communications Co.   |                     | 5984            | Name  |  |  |  |
| Inst<br>all a<br>(as i  | DSS RECEIPTS ructions: The figure you give in this space determines the form you file and the amount you mounts (gross receipts) paid to your cable system by subscribers for the system's second dentified in space E) during the accounting period. For a further explanation of how to core (vii) of the general instructions.  Gross receipts from subscribers for secondary transmission service(s) during the accounting period. | lary transmission   | service         | <b>K</b><br>Gross Receipts                            |  |  |  |
| IMP   | ORTANT: You must complete a statement in space P concerning gross receipts.  | (Amount of          | gross receipts) |   |  |  |  |
| <ul> <li>COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe:</li> <li>Complete block 1, showing your minimum fee.</li> <li>Complete block 2, showing whether your system carried any distant television stations.</li> <li>If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee.</li> <li>If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account.</li> <li>If part 8 or part 9, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of</li> </ul> |  |                     |                 |   |  |  |  |
| bloc  | k 3 below.   |                     |                 |   |  |  |  |
|   | rt 6 of the DSE schedule was completed, the amount from line 7 of block C should be ent<br>low.  | ered on line 2 in t | olock           |   |  |  |  |
|   | rt 7 or part 9, block B, of the DSE schedule was completed, the surcharge amount should<br>block 4 below.  | l be entered on lin | ne              |   |  |  |  |
| Block<br>1  | <b>MINIMUM FEE:</b> All cable systems with semiannual gross receipts of \$527,600 or more a least the minimum fee, regardless of whether they carried any distant stations. This fee is system's gross receipts for the accounting period.   |                     | '               |   |  |  |  |
|   | Line 1. Enter the amount of gross receipts from space K. Line 2. Multiply the amount in line 1 by 0.01064.   | \$                  | 614,873.60      |   |  |  |  |
|   | Enter the result here. This is your minimum fee.   | \$                  | 6,542.26        |   |  |  |  |
| Block<br>2  | DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the in space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column "Yes" in this block.  • Did your cable system carry any distant television stations during the accounting period'  Yes—Complete the DSE schedule.  | 4, you must chec    | ck              |   |  |  |  |
| Block<br>3  | 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.   | \$                  |                 |   |  |  |  |
|   | 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.  | \$                  | _               |   |  |  |  |
| Block   | Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee  | <u> </u>            |                 |   |  |  |  |
| 4   | from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger.   | \$                  | 6,542.26        | 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<br>additional                              |  |  |  |
|   | zero.  Line 3. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9  (Interest Worksheet)  |                     | 0.00            | deposits under<br>Section 111(d)(7)<br>should contact |  |  |  |
|   | ·  | _                   |                 | the Licensing   |  |  |  |
|   | Line 4. FILING FEE   | \$                  | 725.00          | additional fees.<br>Division for the                  |  |  |  |
|   | TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD.  Add Lines 1, 2 and 3 of block 4 and enter total here   | \$                  | 7,267.26        | appropriate<br>form for<br>submitting the             |  |  |  |
|   |  |                     | 1,201.20        | additional fees.                                      |  |  |  |
|   | EFT Trace # or TRANSACTION ID # 27H0N31U   |                     |                 |   |  |  |  |
|   | Remit this amount via electronic payment payable to Register of Copyrights. (See p   | page (i) of the     |                 |   |  |  |  |
|   | general instructions located in the paper SA3 form and the Excel instructions tab for  | or more information | on.)            |   |  |  |  |

ACCOUNTING PERIOD: 2024/1

| Name                                       | LEGAL NAME OF OWNER OF CABLE SY   |   | SYSTEM ID#<br>5984                            |  |  |  |  |  |  |
|--|---|---|---|--|--|--|--|--|--|
| M<br>Channels                              | CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers and (2) the cable system's total number of activated channels, during the accounting period. |   |   |  |  |  |  |  |  |
| Chamers                                    | 1. Enter the total number of channels on which the cable system carried television broadcast stations   |   |   |  |  |  |  |  |  |
|  |   | activated channels<br>n carried television broadcast stations<br>s  | 95  |  |  |  |  |  |  |
| N<br>Individual to                         | INDIVIDUAL TO BE CONTA<br>we can contact about this sta   | CTED IF FURTHER INFORMATION IS NEEDED: (Identify an indiatement of account.)  | ividual                                       |  |  |  |  |  |  |
| Be Contacted<br>for Further<br>Information | Name Alison Thoma   | S   | Telephone <b>940-759-2251</b>                 |  |  |  |  |  |  |
|  | ,   | oute, apartment, or suite number)   |   |  |  |  |  |  |  |
|  | Muenster, TX (City, town, state, zip)  Email athom  |   | ional; 940-759-5557                           |  |  |  |  |  |  |
|  |   | ent of account must be certified and signed in accordance with Co   |   |  |  |  |  |  |  |
| O<br>Certification                         | ·   | ify that (Check one, <i>but only one</i> , of the boxes.)   | ,   |  |  |  |  |  |  |
|  | (Owner other than corpora   | tion or partnership) I am the owner of the cable system as identified   | in line 1 of space B; or                      |  |  |  |  |  |  |
|  | in line 1 of space B a  | n corporation or partnership) I am the duly authorized agent of the own that the owner is not a corporation or partnership; or  |   |  |  |  |  |  |  |
|  | in line 1 of space B.   | n officer (if a corporation) or a partner (if a partnership) of the legal enti  |   |  |  |  |  |  |  |
|  | are true, complete, and correc<br>[18 U.S.C., Section 1001(1986   | t to the best of my knowledge, information, and belief, and are made ir   | good faith.                                   |  |  |  |  |  |  |
|  | X   | /s/Alison Thomas  |   |  |  |  |  |  |  |
|  | (e.g., /s/  | electronic signature on the line above using an "/s/" signature to certify thi<br>John Smith). Before entering the first forward slash of the /s/ signature, planen type /s/ and your name. Pressing the "F2" button will avoid enabling E: | ace your cursor in the box and press the "F2" |  |  |  |  |  |  |
|  | Typed (   | or printed name: Alison Thomas  |   |  |  |  |  |  |  |
|  | Title:  | Chief Financial Officer (Title of official position held in corporation or partnership)   |   |  |  |  |  |  |  |
|  | Date:   | August 19, 2024   |   |  |  |  |  |  |  |

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#       |                                    |  |  |  |
|---|------------------|------------------------------------|--|--|--|
| Nortex Communications Co.   | 5984             | Name                               |  |  |  |
| SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS  The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the lowing sentence:  "In determining the total number of subscribers and the gross amounts paid to the cable system for the bas service of providing secondary transmissions of primary broadcast transmitters, the system shall not include scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 11 | sic<br>le sub-   | Special<br>Statement<br>Concerning |  |  |  |
| For more information on when to exclude these amounts, see the note on page (vii) of the general instructions in the paper SA3 form.  During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners?  |                  |                                    |  |  |  |
| X NO  YES. Enter the total here and list the satellite carrier(s) below   |                  |                                    |  |  |  |
| Name Mailing Address  Name Mailing Address  |                  |                                    |  |  |  |
|   |                  |                                    |  |  |  |
| INTEREST ASSESSMENTS  You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpay For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form.   | ment.            | Q                                  |  |  |  |
| Line 1 Enter the amount of late payment or underpayment   |                  | Interest<br>Assessment             |  |  |  |
| Line 2 Multiply line 1 by the interest rate* and enter the sum here   | <b>-</b><br>days |                                    |  |  |  |
| Line 3 Multiply line 2 by the number of days late and enter the sum here  | <b>-</b><br>274  |                                    |  |  |  |
| Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4,  space L (page 7)  | charge)          |                                    |  |  |  |
| * To view the interest rate chart click on <a href="www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a> . For further assistance properties contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.   |                  |                                    |  |  |  |
| ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.  |                  |                                    |  |  |  |
| NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as given in the or filing.   | iginal           |                                    |  |  |  |
| Owner Address   |                  |                                    |  |  |  |
| First community served Accounting period ID number  |                  |                                    |  |  |  |
|   |                  |                                    |  |  |  |

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ACCOUNTING PERIOD: 2024/1

DSE SCHEDULE. PAGE 10.

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

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

#### FORMULAS FOR COMPUTING A STATION'S DSE

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

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

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

| Independent: its type-value is               | 1.00 |
|--|------|
| Network: its type-value is                   | 0.25 |
| Noncommercial educational: its type-value is | 0.25 |
| N  |      |

Note that local stations are not counted at all in computing DSEs.

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

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

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

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

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

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

#### **TOTAL OF DSEs**

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

### THE ROYALTY FEE

The total royalty fee is determined by calculating the minimum fee and the base rate fee. In addition, cable systems located within certain television market areas may be required to calculate the 3.75 fee and/or the Syndicated Exclusivity Surcharge. Note: Distant multicast streams are not subject to the 3.75 fee or the Syndicated Exclusivity Surcharge. Distant simulcast streams are not subject to any royalty payment.

The 3.75 Fee. If a cable system located in whole or in part within a television market added stations after June 24, 1981, that would not have been permitted under FCC rules, regulations, and authorizations (hereafter referred to as "the former FCC rules") in effect on June 24, 1981, the system must compute the 3.75 fee using a formula based on the number of DSEs added. These DSEs used in computing the 3.75 fee will not be used in computing the base rate fee and Syndicated Exclusivity Surcharge.

The Syndicated Exclusivity Surcharge. Cable systems located in whole or in part within a major television market, as defined by FCC rules and regulations, must calculate a Syndicated Exclusivity Surcharge for the carriage of any commercial VHF station that places a grade B contour, in whole or in part, over the cable system that would have been subject to the FCC's syndicated exclusivity rules in effect on June 24, 1981.

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

What is a "Permitted" Station? A permitted station refers to a distant station whose carriage is not subject to the 3.75 percent rate but is subject to the base rate and, where applicable, the Syndicated Exclusivity Surcharge. A permitted station would include the following:

- 1) A station actually carried within any portion of a cable system prior to June 25, 1981, pursuant to the former FCC rules.
- 2) A station first carried after June 24, 1981, which could have been carried under FCC rules in effect on June 24, 1981, if such carriage would not have exceeded the market quota imposed for the importation of distant stations under those rules.
- 3) A station of the same type substituted for a carried network, non-commercial educational, or regular independent station for which a quota was or would have been imposed under FCC rules (47 CFR 76.59 (b),(c), 76.61 (b),(c),(d), and 767.63 (a) [referring to 76.61 (b),(d)]) in effect on June 24, 1981.
- 4) A station carried pursuant to an individual waiver granted between April 16, 1976, and June 25, 1981, under the FCC rules and regulations in effect on April 15, 1976.
- 5) In the case of a station carried prior to June 25, 1981, on a part-time and/or substitute basis only, that fraction of the current DSE represented by prior carriage.

NOTE: If your cable system carried a station that you believe qualifies as a permitted station but does not fall into one of the above categories, please attach written documentation to the statement of account detailing the basis for its classification.

Substitution of Grandfathered Stations. Under section 76.65 of the former FCC rules, a cable system was not required to delete any station that it was authorized to carry or was lawfully carrying prior to March 31, 1972, even if the total number of distant stations carried exceeded the market quota imposed for the importation of distant stations. Carriage of these grandfathered stations is not subject to the 3.75 percent rate, but is subject to the Base Rate, and where applicable, the Syndicated Exclusivity Surcharge. The Copyright Royalty Tribunal has stated its view that, since section 76.65 of the former FCC rules would not have permitted substitution of a grandfathered station, the 3.75 percent Rate applies to a station substituted for a grandfathered station if carriage of the station exceeds the market quota imposed for the importation of distant stations.

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

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

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

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

U.S. Copyright Office

# COMPUTING THE BASE RATE FEE—PART 8 OF THE DSE

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

If none of the stations were partially distant, calculate your base rate fee according to the following rates—for the system's permitted DSEs as reported in block B, part 6 or from part 5, whichever is applicable.
 First DSE

 1.064% of gross receipts

 Each of the second, third, and fourth DSEs

 0.701% of gross receipts

 The fifth and each additional DSE
 0.330% of gross receipts

#### PARTIALLY DISTANT STATIONS—PART 9 OF THE DSE SCHEDULE

- · If any of the stations were partially distant:
- 1. Divide all of your subscribers into subscriber groups depending on their location. A particular subscriber group consists of all subscribers who are distant with respect to exactly the same complement of stations.
  - 2. Identify the communities/areas represented by each subscriber group.
- 3. For each subscriber group, calculate the total number of DSEs of that group's complement of stations.

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

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

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

- Calculate a separate base rate fee for each subscriber group, using
   (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:

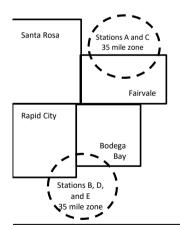
- When the fourth decimal point is 1, 2, 3, or 4, the third decimal remains unchanged (example: .34647 is rounded to .346).
- When the fourth decimal point is 5, 6, 7, 8, or 9, the third decimal is rounded up (example: .34651 is rounded to .347).

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

In most cases under current FCC rules, all of Fairvale would be within the local service area of both stations A and C and all of Rapid City and Bodega Bay would be within the local service areas of stations B, D, and E.



| Distant Stations Carri | ed    | Identification | Identification of Subscriber Groups |                  |  |  |  |
|------------------------|-------|----------------|-------------------------------------|------------------|--|--|--|
| STATION                | DSE   | CITY           | OUTSIDE LOCAL                       | GROSS RECEIPTS   |  |  |  |
| A (independent)        | 1.0   |                | SERVICE AREA OF                     | FROM SUBSCRIBERS |  |  |  |
| B (independent)        | 1.0   | Santa Rosa     | Stations A, B, C, D ,E              | \$310,000.00     |  |  |  |
| C (part-time)          | 0.083 | Rapid City     | Stations A and C                    | 100,000.00       |  |  |  |
| D (part-time)          | 0.139 | Bodega Bay     | Stations A and C                    | 70,000.00        |  |  |  |
| E (network)            | 0.25  | Fairvale       | Stations B, D, and E                | 120,000.00       |  |  |  |
| TOTAL DSEs             | 2.472 |                | TOTAL GROSS RECEIPTS                | \$600,000.00     |  |  |  |

 Minimum Fee Total Gross Receipts
 \$600,000.00

 x
 .01064

 \$6.384.00

| First Subscriber Group<br>(Santa Rosa) |              | Second Subscriber Group     |              | Third Subscriber Group      |              |  |
|--|--------------|-----------------------------|--------------|-----------------------------|--------------|--|
|  |              | (Rapid City and Bodega Bay) |              | (Fairvale)                  |              |  |
| Gross receipts                         | \$310,000.00 | Gross receipts              | \$170,000.00 | Gross receipts              | \$120,000.00 |  |
| DSEs                                   | 2.472        | DSEs                        | 1.083        | DSEs                        | 1.389        |  |
| Base rate fee                          | \$6,497.20   | Base rate fee               | \$1,907.71   | Base rate fee               | \$1,604.03   |  |
| \$310,000 x .01064 x 1.0 =             | 3,298.40     | \$170,000 x .01064 x 1.0 =  | 1,808.80     | \$120,000 x .01064 x 1.0 =  | 1,276.80     |  |
| \$310,000 x .00701 x 1.472 =           | 3,198.80     | \$170,000 x .00701 x .083 = | 98.91        | \$120,000 x .00701 x .389 = | 327.23       |  |
| Base rate fee                          | \$6,497.20   | Base rate fee               | \$1,907.71   | Base rate fee               | \$1,604.03   |  |

**Total Base Rate Fee:** \$6,497.20 + \$1,907.71 + \$1,604.03 = \$10,008.94

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

**ACCOUNTING PERIOD: 2024/1** 

| DSE SCHEDULE. PAGE   | i i  |      |              |          | -          | VOTEL 10 " |  |  |  |
|----------------------|--|------|--------------|----------|------------|------------|--|--|--|
| 1                    | LEGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM   |      |              |          |            |            |  |  |  |
| •                    | Nortex Communications Co. 5984   |      |              |          |            |            |  |  |  |
|                      | SUM OF DSEs OF CATEGORY "O" STATIONS:  |      |              |          |            |            |  |  |  |
|                      | <ul> <li>Add the DSEs of each station</li> </ul>   |      |              |          |            |            |  |  |  |
|                      | Enter the sum here and in line   | 0.00 |              |          |            |            |  |  |  |
| _                    | Instructions:  |      |              |          |            |            |  |  |  |
| 2                    | In the column headed "Call Sign": list the call signs of all distant stations identified by the letter "O" in column 5 |      |              |          |            |            |  |  |  |
|                      | of space G (page 3).   |      |              |          |            |            |  |  |  |
|                      | for mercial educational station, give the DSE as ".25."  |      |              |          |            |            |  |  |  |
| Category "O"         |  |      |              |          |            |            |  |  |  |
| Stations             | CALL SIGN  | DSE  | CALL SIGN    | DSE      | CALL SIGN  | DSE        |  |  |  |
| Otations             | CALL GIGIT   | DOL  | O/ LEE OIOIV | DOL      | GALL GIGIT | DOL        |  |  |  |
|                      |  |      |              |          |            |            |  |  |  |
|                      |  |      |              |          |            |            |  |  |  |
|                      |  |      |              |          |            |            |  |  |  |
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| Add rows as          |  |      |              | <b></b>  |            |            |  |  |  |
| necessary.           |  |      |              | <b></b>  |            |            |  |  |  |
| Remember to copy all |  |      |              | <b></b>  |            |            |  |  |  |
| formula into new     |  |      |              | <b>-</b> |            |            |  |  |  |
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| 7 | <br> | 5 | · • · · · · · · · · · · · · · · · · · · |  |
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|   |      |   |   |  |

| Name  |   | OWNER OF CABLE SYSTEM: munications Co.   |   |  |   |  |  | (  | SYSTEM ID#<br>5984 |
|---|---|--|---|--|---|--|--|--|--------------------|
| Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel | Column 2 figure should Column 3 Column 4 be carried out Column 5 give the type- Column 6                      | CAPACITY st the call sign of all dista :: For each station, give t correspond with the infor :: For each station, give t :: Divide the figure in colu : at least to the third decir :: For each independent s value as ".25." :: Multiply the figure in co point. This is the station's  | he number of I<br>mation given i<br>he total numbe<br>umn 2 by the fi<br>mal point. This<br>station, give th                        | hours your cable syster<br>n space J. Calculate or<br>er of hours that the stati<br>gure in column 3, and g<br>is the "basis of carriag<br>e "type-value" as "1.0."                          | n carried the stat<br>ally one DSE for e<br>on broadcast over<br>give the result in of<br>e value" for the s<br>For each networ | ion during the sach station.  er the air durin decimals in column.  k or noncomm | g the accour<br>umn 4. This<br>ercial educa            | nting period. figure must ational station, |                    |
| Capacity  |   |  | CATEGORY  | Y LAC STATIONS:  | COMPUTAT  | ION OF DS  | Es   |  |                    |
|   | 1. CALL<br>SIGN   | 2. NUMBE<br>OF HOI<br>CARRIE<br>SYSTE  | JRS<br>ED BY<br>M   | 3. NUMBER<br>OF HOURS<br>STATION<br>ON AIR   | 4. BASIS OI<br>CARRIAC<br>VALUE   | GE .   | 5. TYPE<br>VALUE                                       |  | SE                 |
|   |   |  | ÷   |  | =   | X  |  | =  |                    |
|   |   |  | ÷   |  | =   | x<br>x   |  |  |                    |
|   |   |  | ÷   |  | =   | x  |  | =  |                    |
|   |   |  | ÷   |  | =<br>=  | X  |  | =  |                    |
|   |   |  | ÷   |  | =   | x<br>x   |  | =  |                    |
|   |   |  | ÷   |  | =   | x  |  | =  |                    |
|   | Add the DSEs  | of CATEGORY LAC S<br>of each station.<br>Im here and in line 2 of p  |   | hedule,  | ▶   |  | 0.00   |  |                    |
| Computation of DSEs for Substitute-Basis Stations                                   | Was carried tions in effetal Broadcast of space I).     Column 2: at your option.     Column 3:     Column 4: | te the call sign of each stand by your system in substant on October 19, 1976 (one or more live, nonnetwomber of each station give the This figure should correspond to the International Control of the International Cont | itution for a pro<br>as shown by the<br>ork programs de<br>number of live<br>spond with the<br>s in the calenda<br>on 2 by the figu | ogram that your system<br>he letter "P" in column i<br>luring that optional carri<br>e, nonnetwork program<br>information in space I.<br>ar year: 365, except in<br>ure in column 3, and giv | was permitted to<br>7 of space I); and<br>age (as shown by<br>s carried in subst<br>a leap year.<br>we the result in co         | o delete under I the word "Yes" itution for prog                                 | FCC rules a in column 2 or a rams that we do no less t | of<br>ere deleted<br>than the third        | n).                |
|   |   | Sl   | JBSTITUTE   | -BASIS STATION   | IS: COMPUTA   | ATION OF D   | SEs  |  |                    |
|   | 1. CALL<br>SIGN   | 2. NUMBER<br>OF<br>PROGRAMS  | 3. NUMB<br>OF DA'<br>IN YEA   | YS   | 1. CALL<br>SIGN   | 2. NUMI<br>OF<br>PRO   | BER<br>GRAMS   | 3. NUMBER<br>OF DAYS<br>IN YEAR            | 4. DSE             |
|   |   |  | ÷   |  |   |  | ÷  |  | =                  |
|   |   |  | ÷<br>÷  | =  |   |  | ÷  |  | =                  |
|   |   | -  | +   | =  |   |  | ÷  |  | =                  |
|   |   |  | +   | =  |   |  | ÷  |  | =                  |
|   | Add the DSEs  | GOF SUBSTITUTE-BASI<br>of each station.<br>Im here and in line 3 of p  |   |  | ▶   |  | ÷  |  | =                  |
| 5   |   | ER OF DSEs: Give the am  |   | boxes in parts 2, 3, and   | 4 of this schedule  | e and add them   | to provide th  | ne total                                   |                    |
| •   | number of DSE   | s applicable to your systen  | n.  |  |   |  |  |  |                    |
| Total Number  |   | of DSEs from part 2 ●  |   |  |   | <b>-</b>   |  | 0.00                                       |                    |
| of DSEs   |   | of DSEs from part 3 ●  |   |  |   | <u></u>  |  | 0.00                                       |                    |
|   | 3. Number   | of DSEs from part 4 ●  |   |  |   | <u> </u>   |  | 0.00                                       |                    |
|   | TOTAL NUMBE   | R OF DSEs  |   |  |   |  |  |  | 0.00               |

DSE SCHEDULE. PAGE 13. ACCOUNTING PERIOD: 2024/1

| LEGAL NAME OF O  |  |   |   |   |                                     |  | S                     | YSTEM ID# | Name  |
|--|--|---|---|---|-------------------------------------|--|-----------------------|-----------|---|
| Nortex Commi   | unications co.   |   |   |   |                                     |  |                       | 5984      |   |
| schedule.  | ck A must be comp "Yes," leave the re "No," complete block "No," complet | mainder of pa   | ·   | of the DSE schedu   | ule blank and o                     | complete part 8                              | 3, (page 16) of the   |           | 6   |
| 1 your answer ii   | No, complete bloc  | CKS D and C I   |   | ELEVISION MA  | ARKETS                              |  |                       |           | Computation of                                      |
|  |  | schedule—D  | •   |   |                                     |  | C rules and regulat   | tions in  | 3.75 Fee  |
|  |  | BLO   | CK B: CARR  | IAGE OF PERM  | MITTED DS                           | Es   |                       |           |   |
| Column 1:<br>CALL SIGN   | FCC rules and re   | gulations pric<br>e DSE Sched   | or to June 25, 1<br>dule. (Note: The  | part 2, 3, and 4 of t<br>981. For further ex<br>e letter M below ref<br>act of 2010.)                         | planation of p                      | ermitted station                             | ns, see the           | j         |   |
| Column 2: Enter the appropriate letter indicating the basis on which you carried a permitted station.  BASIS OF (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.)  PERMITTED A Stations carried pursuant to the FCC market quota rules [76.57, 76.59(b), 76.61(b)(c), 76.63(a) referring to 76.61(b)(c)]  CARRIAGE 76.61(b)(c)]  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) |  |   |   |   |                                     |  |                       |           |   |
|  | C Noncommerica D Grandfathered instructions fo E Carried pursua *F A station pre   | al educationa<br>I station (76.6<br>Ir DSE sched<br>Int to individu<br>Viously carrie<br>IHF station wi | I station [76.59<br>65) (see paragraule).<br>all waiver of FC<br>d on a part-time<br>of thin grade-B co | (c), 76.61(d), 76.63<br>aph regarding subs<br>CC rules (76.7)<br>e or substitute basi<br>ontour, [76.59(d)(5) | 3(a) referring to stitution of gran | o 76.61(d)]<br>ndfathered stat<br>e 25, 1981 | ions in the           |           |   |
| Column 3:  |  | e stations ider   | ntified by the le   | parts 2, 3, and 4 of<br>tter "F" in column 2  |                                     |  | ksheet on page 14     | 4 of      |   |
| 1. CALL<br>SIGN  | 2. PERMITTED<br>BASIS  | 3. DSE  | 1. CALL<br>SIGN   | 2. PERMITTED<br>BASIS   | 3. DSE                              | 1. CALL<br>SIGN                              | 2. PERMITTED<br>BASIS | 3. DSE    |   |
|  |  |   |   |   |                                     |  |                       |           |   |
|  |  |   |   |   |                                     |  |                       |           |   |
|  |  |   |   |   |                                     |  |                       |           |   |
|  |  |   |   |   |                                     |  |                       |           |   |
|  |  |   | •   |   | •                                   | •  |                       |           |   |
|  |  |   |   |   |                                     |  |                       | 0.00      |   |
|  |  | E   | BLOCK C: CC   | MPUTATION OF  | F 3.75 FEE                          |  |                       |           |   |
| Line 1: Enter the  | total number of  | DSEs from p   | part 5 of this s  | chedule   |                                     |  |                       |           |   |
| Line 2: Enter the  | sum of permitted   | d DSEs from   | n block B abov  | /e  |                                     |  |                       |           |   |
| Line 3: Subtract<br>(If zero, le   | line 2 from line 1<br>eave lines 4–7 bl  |   |   | •   |                                     | ate.   |                       | 0.00      |   |
| Line 4: Enter gro  | ess receipts from  | space K (pa   | age 7)  |   |                                     |  | x 0.03                | 375       | Do any of the DSEs represent                        |
| Line 5: Multiply li  | ine 4 by 0.0375 a  | and enter su  | m here  |   |                                     |  |                       |           | partially<br>permited/<br>partially<br>nonpermitted |
| Line 6: Enter tota   | al number of DSE   | Es from line  | 3   |   |                                     |  | x                     |           | carriage? If yes, see part 9 instructions.          |
| Line 7: Multiply li  | ine 6 by line 5 an   | d enter here  | e and on line 2   | 2, block 3, space   | L (page 7)                          |  |                       | 0.00      |   |

|                | E OF OWNER OF CABLE  ommunications Co |             |                 |                       |         |                 | S                     | 7STEM ID#<br>5984 | Name          |
|----------------|---------------------------------------|-------------|-----------------|-----------------------|---------|-----------------|-----------------------|-------------------|---------------|
|                |                                       | BLOCK       | A: TELEVIS      | SION MARKETS          | (CONTIN | UED)            |                       |                   |               |
| 1. CAI<br>SIGN |                                       |             | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS | 3. DSE  | 1. CALL<br>SIGN | 2. PERMITTED<br>BASIS | 3. DSE            | 6             |
|                |                                       |             |                 |                       |         |                 |                       |                   | Computation o |
|                |                                       |             |                 |                       |         |                 |                       |                   | 3.75 Fee      |
|                |                                       |             |                 |                       |         |                 |                       |                   |               |
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|                |                                       |             | <u> </u>        | †                     |         |                 |                       |                   | ļ             |

**ACCOUNTING PERIOD: 2024/1** 

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 Instructions: You must complete this worksheet for those stations identifed by the letter "F" in column 2 of block B. part 6 (i.e., those Worksheet for stations carried prior to June 25, 1981, under former FCC rules governing part-time and substitute carriage.) Column 1: List the call sign for each distant station identifed by the letter "F" in column 2 of part 6 of the DSE schedule. Computating the DSE Column 2: Indicate the DSE for this station for a single accounting period, occurring between January 1, 1978 and June 30, 1981. Schedule for Column 3: Indicate the accounting period and year in which the carriage and DSE occurred (e.g., 1981/1). Permitted Column 4: Indicate the basis of carriage on which the station was carried by listing one of the following letters: Part-Time and (Note that the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) Substitute A—Part-time specialty programming: Carriage, on a part-time basis, of specialty programming under FCC rules, sections Carriage 76.59(d)(1),76.61(e)(1), or 76.63 (referring to 76.61(e)(1)). B—Late-night programming: Carriage under FCC rules, sections 76.59(d)(3), 76.61(e)(3), or 76.63 (referring to 76.61(e)(3)). S-Substitute carriage under certain FCC rules, regulations, or authorizations. For further explanation, see page (vi) of the general instructions in the paper SA3 form. Column 5: Indicate the station's DSE for the current accounting period as computed in parts 2, 3, and 4 of this schedule. Column 6: Compare the DSE figures listed in columns 2 and 5 and list the smaller of the two figures here. This figure should be entered in block B, column 3 of part 6 for this station. IMPORTANT: The information you give in columns 2, 3, and 4 must be accurate and is subject to verification from the designated statement of account on fle in the Licensing Division. PERMITTED DSE FOR STATIONS CARRIED ON A PART-TIME AND SUBSTITUTE BASIS 1. CALL 2. PRIOR 3. ACCOUNTING 4. BASIS OF 5. PRESENT 6. PERMITTED SIGN DSE PERIOD CARRIAGE DSE Instructions: Block A must be completed. 7 Computation If your answer is "Yes." complete blocks B and C. below. of the If your answer is "No," leave blocks B and C blank and complete part 8 of the DSE schedule. **Syndicated BLOCK A: MAJOR TELEVISION MARKET Exclusivity** Surcharge Is any portion of the cable system within a top 100 major television market as defined by section 76.5 of FCC rules in effect June 24, 1981? Yes—Complete blocks B and C . No—Proceed to part 8 BLOCK B: Carriage of VHF/Grade B Contour Stations **BLOCK C: Computation of Exempt DSEs** Is any station listed in block B of part 6 the primary stream of a Was any station listed in block B of part 7 carried in any commucommercial VHF station that places a grade B contour, in whole nity served by the cable system prior to March 31, 1972? (refer to former FCC rule 76.159) or in part, over the cable system? Yes—List each station below with its appropriate permitted DSE Yes—List each station below with its appropriate permitted DSE X No—Enter zero and proceed to part 8. X No—Enter zero and proceed to part 8. CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE CALL SIGN DSE 0.00 0.00 **TOTAL DSEs** TOTAL DSEs

| LEGAL NA      | ME OF OWNER OF CABLE SYSTEM: Nortex Communications Co.   | 5984 SYSTEM ID# | Name                      |
|---------------|--|-----------------|---------------------------|
|               | BLOCK D: COMPUTATION OF THE SYNDICATED EXCLUSIVITY SURCHARGE   |                 |                           |
| Section<br>1  | Enter the amount of gross receipts from space K (page 7)   | 614,873.60      | 7                         |
| Section<br>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<br>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.  |                 |                           |
|               | SECTION 3: TOP 50 TELEVISION MARKET  |                 |                           |
| Section<br>3a | Did your cable system retransmit the signals of any partially distant television stations during the accounting period?      X Yes—Complete part 9 of this schedule.  No—Complete the applicable section below.  |                 |                           |
|               | If the figure in section 2, line C is 4.000 or less, compute your surcharge here and leave section 3b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by .00599 by the DSE. Enter the result on line A below.  |                 |                           |
|               | A. Enter 0.00599 of gross receipts (the amount in section1)  |                 |                           |
|               | B. Enter 0.00377 of gross receipts (the amount in section.1)   |                 |                           |
|               | C. Subtract 1.000 from total permitted DSEs (the figure on line C in section 2) and enter here   |                 |                           |
|               | D. Multiply line B by line C and enter here  | _               |                           |
|               | E. Add lines A and D. This is your surcharge.  Enter here and on line 2 of block 4 in space L (page 7)  Syndicated Exclusivity Surcharge   |                 |                           |
| Section<br>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   |                 |                           |
| Section<br>4a | 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 4b blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.003 by the DSE. Enter the result on line A below.  A. Enter 0.00300 of gross receipts (the amount in section 1) |                 |                           |
|               | B. Enter 0.00189 of gross receipts (the amount in section 1)   |                 |                           |
|               | C.Subtract 1.000 from total permitted DSEs (the fgure on line C in section 2)  and enter here  |                 |                           |
|               | D. Multiply line B by line C and enter here  |                 |                           |
|               | E. Add lines A and D. This is your surcharge. Enter here and on line 2 of block 4 in space L (page 7) Syndicated Exclusivity Surcharge   |                 |                           |

| Name                     | LEGAL NAM  | ME OF OWNER OF CABLE SYSTEM: SYSTEM ID#  |  |  |  |  |  |  |  |  |  |
|--------------------------|--|--|--|--|--|--|--|--|--|--|--|
| Ivaille                  | I  | Nortex Communications Co. 5984   |  |  |  |  |  |  |  |  |  |
| 7                        | Section<br>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<br>Syndicated     |  | B. Enter 0.00189 of gross receipts (the amount in section 1) ▶ _\$   |  |  |  |  |  |  |  |  |  |
| Exclusivity<br>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   |  |  |  |  |  |  |  |  |  |
|                          | Instru   | ctions:  |  |  |  |  |  |  |  |  |  |
| 8                        | You m  | 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. ock A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations.   |  |  |  |  |  |  |  |  |  |
| Computation              |  | ir answer is "No," compute your system's base rate fee in block B. Leave part 9 blank.   |  |  |  |  |  |  |  |  |  |
| of                       | 1  | ar answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 9. Leave block B below   |  |  |  |  |  |  |  |  |  |
| Base Rate Fee            | blank<br>What i  | is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers  |  |  |  |  |  |  |  |  |  |
|                          |  | ocated within that station's local service area and others were located outside that area. For the definition of a station's "local  |  |  |  |  |  |  |  |  |  |
|                          | service  | service area," see page (v) of the general instructions.   |  |  |  |  |  |  |  |  |  |
|                          | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS  |  |  |  |  |  |  |  |  |  |  |
|                          | BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS  • Did your cable system retransmit the signals of any partially distant television stations during the accounting period? |  |  |  |  |  |  |  |  |  |  |
|                          | _  | X Yes—Complete part 9 of this schedule. No—Complete the following sections.  |  |  |  |  |  |  |  |  |  |
|                          |  | BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE  |  |  |  |  |  |  |  |  |  |
|                          | Section<br>1   | Enter the amount of gross receipts from space K (page 7) ▶\$   |  |  |  |  |  |  |  |  |  |
|                          | Section  | Enter the total number of permitted DSEs from block B, part 6 of this schedule.  |  |  |  |  |  |  |  |  |  |
|                          | 2  | (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.) ▶  |  |  |  |  |  |  |  |  |  |
|                          | Section  |  |  |  |  |  |  |  |  |  |  |
|                          | 3  | If the figure in section 2 is <b>4.000 or less</b> , compute your base rate fee here and leave section 4 blank.  NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. |  |  |  |  |  |  |  |  |  |
|                          |  | A. Enter 0.01064 of gross receipts  (the amount in section 1)  |  |  |  |  |  |  |  |  |  |
|                          |  | 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  |  |  |  |  |  |  |  |  |  |

DSE SCHEDULE. PAGE 17. ACCOUNTING PERIOD: 2024/1

| LEGAL NAME OF OWNER OF CABLE SYS  | TEM:  | SYSTEM ID#        |                            |
|---|---|-------------------|----------------------------|
| Nortex Communications Co.   |   | 5984              | Name                       |
|   | nan 4.000, compute your base rate fee here and leave section 3 blank.   |                   |                            |
| 4 A Finter 0.04004 of muses in  | and inte  |                   | 8                          |
| A. Enter 0.01064 of gross re<br>(the amount in section 1)                           | > \$  |                   |                            |
|   |   |                   |                            |
| B. Enter 0.00701 of gross re<br>(the amount in section 1)                           | ► \$  |                   | Computation of             |
|   |   |                   | Base Rate Fee              |
| C. Multiply line B by 3.000 a   | and enter here <b>&gt;</b>  |                   |                            |
| D. Enter 0.00330 of gross re  |   |                   |                            |
| (the amount in section 1)   | <u> </u>  |                   |                            |
| E. Subtract 4.000 from total  |   |                   |                            |
| (the figure in section 2) a   | and enter here  |                   |                            |
| F. Multiply line D by line E a  | and enter here ▶ \$   |                   |                            |
| G. Add lines A, C, and F. Th  | ,   |                   |                            |
| Enter here and in block 3  Base Rate Fee  | B, line 1, space L (page 7)  ▶ \$   | 0.00              |                            |
| Dase Nate i ee  | <b>▶</b> \$   | 0.00              |                            |
| IMPORTANT: It is no longer necessar   | ry to report television signals on a system-wide basis. Carriage of television broadcas   | st signals shall  |                            |
| instead be reported on a community-b Space G.                                       | sy-community basis (subscriber groups) if the cable system reported multiple channel  | l line-ups in     | 9                          |
| '   | carried were partially distant, the statute allows you, in computing your base rate fee,  | to exclude        |                            |
| receipts from subscribers located with  | in the station's local service area, from your system's total gross receipts. To take ac  |                   | Computation of             |
| exclusion, you must:  |   |                   | Base Rate Fee              |
|   | to subscriber groups, each group consisting entirely of subscribers that are distant to   |                   | and<br>Syndicated          |
|   | Next: Treat each subscriber group as if it were a separate cable system. Determine t<br>s gross receipts attributable to that group, and calculate a separate base rate fee for a                         |                   | Exclusivity                |
| Finally: Add up the separate base rate  | e fees for each subscriber group. That total is the base rate fee for your system.  |                   | Surcharge<br>for           |
|   | stem is located within the top 100 television market and the station is not exempt in pa  |                   | Partially<br>Distant       |
| . ,   | / Surcharge for each subscriber group. In this case, complete both block A and B belatside all major television markets, complete block A only.   | ow. However, if   | Stations, and              |
| How to Identify a Subscriber Group  | for Partially Distant Stations  |                   | for Partially<br>Permitted |
|   | determine the local service area of each wholly distant and each partially distant stati  | on you            | Stations                   |
| carried to that community.  |   |                   |                            |
|   | ach partially distant station you carried, determine which of your subscribers were loc<br>a. A subscriber located outside the local service area of a station is distant to that stat<br>he subscriber.) |                   |                            |
| Step 3: Divide your subscribers into s  | ubscriber groups according to the complement of stations to which they are distant. E   | ∃ach              |                            |
| · .   | of subscribers who are distant to exactly the same complement of stations. Note that<br>then the distant stations it carried have local service areas that coincide.                                      | it a cable system |                            |
| Computing the base rate fee for each groups.  | ch subscriber group: Block A contains separate sections, one for each of your system  | em's subscriber   |                            |
| In each section:  |   |                   |                            |
| Identify the communities/areas repre  | ,   |                   |                            |
| Give the call sign for each of the stat<br>subscribers in the group.                | tions in the subscriber group's complement—that is, each station that is distant to all   | of the            |                            |
| • If:   |   |                   |                            |
| your system is located wholly outsic<br>of this schedule; or,                       | de all major and smaller television markets, give each station's DSE as you gave it in  | parts 2, 3, and 4 |                            |
| <ol><li>any portion of your system is locate<br/>part 6 of this schedule.</li></ol> | d in a major or smaller television market, give each station's DSE as you gave it in b  | lock B,           |                            |
| Add the DSEs for each station. This   | gives you the total DSEs for the particular subscriber group.   |                   |                            |
| Calculate gross receipts for the subs<br>in the paper SA3 form.                     | scriber group. For further explanation of gross receipts see page (vii) of the general in   | nstructions       |                            |
| Compute a base rate fee for each su   | ubscriber group using the formula outline in block B of part 8 of this schedule on the p  |                   |                            |
|   | e the DSE and gross receipts figure applicable to the particular subscriber group (tha<br>stations and total gross receipts from the subscribers in that group). You do not need                          |                   |                            |

|      | LEGAL NAME OF OWNER OF CABLE SYSTEM:  | SYSTEM ID#    |
|------|---|---------------|
| Name | Nortex Communications Co.   | 5984          |
|      | 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 | 20            |
|      | 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 nonpermit   | itted distant |
|      | signals. Write "Nonpermitted 3.75 stations" at the top of this page. Multiply the subscriber group gross receipts by total DSEs by  | ру            |
|      | .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 repo   | rted          |
|      | for each part 9 used in steps 1 and 2 must equal the amount reported in space K.  |               |
|      | <b>Step 3:</b> 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 f   | rom           |
|      | 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 agreem   |               |
|      | entered into on or before June 30, 2009 between a cable system or an association representing the cable system and a primal transmitter or an association representing the primary transmitter.   | ry            |
|      | transmitter or an association representing the primary transmitter.   |               |
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| Nortex Communica         |           |                          |             |                          |          | SY   | STEM ID#<br>5984 | Name                 |
|--------------------------|-----------|--------------------------|-------------|--------------------------|----------|--|------------------|----------------------|
| В                        | LOCK A:   | COMPUTATION OF           | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP  |                  |                      |
|                          | FIRST     | SUBSCRIBER GROU          | <b>D</b>    |                          | SECOND   | SUBSCRIBER GROUP                                 | )                | •                    |
| COMMUNITY/ AREA          | Muenst    | er, TX, Lake Kiow        | a,Collin    | COMMUNITY/ AREA          |          |  | 0                | <b>9</b> Computation |
| CALL SIGN                | DSE       | CALL SIGN                | DSE         | CALL SIGN                | DSE      | CALL SIGN  | DSE              | of                   |
|                          |           |                          |             |                          |          |  |                  | Base Rate Fee        |
|                          |           |                          |             |                          |          |  |                  | and                  |
|                          |           |                          |             |                          |          |  |                  | Syndicated           |
|                          |           |                          |             |                          |          |  |                  | Exclusivity          |
|                          |           |                          |             |                          |          |  |                  | Surcharge            |
|                          |           |                          | •••••       |                          |          |  |                  | for                  |
|                          |           |                          |             |                          |          |  |                  | Partially<br>Distant |
|                          |           |                          |             |                          |          | <del>                                     </del> |                  | Stations             |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          | <u> </u>  |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
| Total DSEs               |           |                          | 0.00        | Total DSEs               |          |  | 0.00             |                      |
| Gross Receipts First Gro | oup       | \$ 614,                  | 873.60      | Gross Receipts Second    | d Group  | \$   | 0.00             |                      |
| Base Rate Fee First Gro  | oup       | \$                       | 0.00        | Base Rate Fee Second     | d Group  | \$   | 0.00             |                      |
|                          | THIRD     | SUBSCRIBER GROU          | )           |                          | FOURTH   | SUBSCRIBER GROUP                                 | )                |                      |
| COMMUNITY/ AREA          |           |                          | 0           | COMMUNITY/ AREA          |          |  | 0                |                      |
| CALL SIGN                | DSE       | CALL SIGN                | DSE         | CALL SIGN                | DSE      | CALL SIGN  | DSE              |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  | <u> </u>         |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          | <b>.</b> |  |                  |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
|                          |           |                          |             |                          |          |  | -                |                      |
|                          |           |                          |             |                          |          | <u> </u>   | -                |                      |
| Total DSEs               |           |                          | 0.00        | Total DSEs               |          |  | 0.00             |                      |
| Gross Receipts Third G   | oup       | \$                       | 0.00        | Gross Receipts Fourth    | Group    | \$   | 0.00             |                      |
|                          |           |                          |             |                          |          |  |                  |                      |
| Base Rate Fee Third Gi   | oup       | \$                       | 0.00        | Base Rate Fee Fourth     | Group    | \$   | 0.00             |                      |
| Base Rate Fee: Add the   | base rate | e fees for each subscrib | per group a | s shown in the boxes abo | ove.     |  |                  |                      |
| Enter here and in block  |           |                          | J 46 G      | and and appearance       |          | \$   | 0.00             |                      |

| LEGAL NAME OF OWNER Nortex Communica |              |                 |          |                          |             | S               | YSTEM ID#<br>5984 | Name                      |
|--------------------------------------|--------------|-----------------|----------|--------------------------|-------------|-----------------|-------------------|---------------------------|
| В                                    |              |                 |          | ATE FEES FOR EACH        |             |                 | D                 |                           |
| COMMUNITY/ AREA                      | FIFIH        | SUBSCRIBER GROU | 0        | COMMUNITY/ AREA          | SIXIH       | SUBSCRIBER GROU | 0                 | 9<br>Commutation          |
| CALL SIGN                            | DSE          | CALL SIGN       | DSE      | CALL SIGN                | DSE         | CALL SIGN       | DSE               | Computation of            |
|                                      |              |                 |          |                          |             |                 |                   | Base Rate Fee             |
|                                      |              |                 |          |                          |             |                 |                   | and                       |
|                                      |              |                 |          |                          |             | -               |                   | Syndicated<br>Exclusivity |
|                                      |              |                 |          |                          |             |                 |                   | Surcharge                 |
|                                      |              |                 |          |                          |             |                 |                   | for                       |
|                                      |              |                 |          |                          |             |                 |                   | Partially                 |
|                                      |              |                 |          |                          |             |                 |                   | Distant                   |
|                                      |              |                 |          |                          |             |                 |                   | Stations                  |
|                                      |              |                 |          |                          |             |                 | <u> </u>          |                           |
|                                      |              |                 |          |                          |             |                 |                   |                           |
|                                      |              |                 |          |                          |             |                 |                   |                           |
|                                      |              |                 |          |                          |             |                 |                   |                           |
|                                      |              |                 |          |                          |             |                 |                   |                           |
| Total DSEs                           |              |                 | 0.00     | Total DSEs               |             |                 | 0.00              |                           |
| Gross Receipts First Gr              | oup          | \$              | 0.00     | Gross Receipts Secon     | d Group     | \$              | 0.00              |                           |
| Base Rate Fee First Gr               | oup          | \$              | 0.00     | Base Rate Fee Secon      | d Group     | \$              | 0.00              |                           |
|                                      | SEVENTH      | SUBSCRIBER GROU | JP       |                          | EIGHTH      | SUBSCRIBER GROU | Р                 |                           |
| COMMUNITY/ AREA                      |              |                 | 0        | COMMUNITY/ AREA          |             |                 | 0                 |                           |
| CALL SIGN                            | DSE          | CALL SIGN       | DSE      | CALL SIGN                | DSE         | CALL SIGN       | DSE               |                           |
|                                      |              |                 |          |                          |             |                 |                   |                           |
|                                      |              |                 |          |                          |             |                 |                   |                           |
|                                      | <u>-</u>     |                 |          |                          |             | -               |                   |                           |
|                                      |              |                 |          |                          |             |                 |                   |                           |
|                                      |              |                 |          |                          |             |                 |                   |                           |
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|                                      |              |                 |          |                          |             |                 |                   |                           |
|                                      | ļ            |                 |          |                          |             |                 |                   |                           |
|                                      | ļ            |                 |          |                          |             |                 |                   |                           |
|                                      | <b>-</b>     |                 | <u> </u> | -                        | <del></del> |                 | <u></u>           |                           |
| Total DSEs                           | 1            |                 | 0.00     | Total DSEs               |             |                 | 0.00              |                           |
| Gross Receipts Third G               | roup         | \$              | 0.00     | Gross Receipts Fourth    | Group       | \$              | 0.00              |                           |
| ·                                    | •            |                 |          |                          | •           |                 |                   |                           |
| Base Rate Fee Third G                | roup         | \$              | 0.00     | Base Rate Fee Fourth     | ı Group     | \$              | 0.00              |                           |
|                                      |              |                 |          |                          |             |                 |                   |                           |
|                                      |              |                 |          | as shown in the boxes al |             |                 |                   |                           |

|                     |               |                  |         |                                  |             |                |         | -                                 |
|---------------------|---------------|------------------|---------|----------------------------------|-------------|----------------|---------|-----------------------------------|
|                     | D.            |                  |         | TE FEES FOR EACH                 |             |                |         | <u> </u>                          |
| 9                   | <b>0</b>      | SUBSCRIBER GROUI | IENIH   | COMMUNITY/ AREA                  | <u>UP</u> 0 | SUBSCRIBER GRO | NINTH   | COMMUNITY/ AREA                   |
| Computa             |               |                  |         | COMMUNITY AREA                   | U           |                |         | JOININIONII I/ AREA               |
| of                  | DSE           | CALL SIGN        | DSE     | CALL SIGN                        | DSE         | CALL SIGN      | DSE     | CALL SIGN                         |
| Base Rate           |               |                  |         |                                  |             |                |         |                                   |
| and                 |               |                  |         |                                  |             |                |         |                                   |
| Syndica             |               | -                |         |                                  | <u></u>     |                |         |                                   |
| Exclusiv<br>Surchar | <mark></mark> |                  |         |                                  | <u></u>     |                |         |                                   |
| for                 |               |                  |         |                                  | <del></del> | <b> </b>       |         |                                   |
| Partial             |               |                  |         |                                  |             |                |         |                                   |
| Distan              |               |                  |         |                                  |             |                |         |                                   |
| Station             |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  | <u></u>     |                |         |                                   |
|                     | <del></del>   |                  | -       |                                  | <u></u>     |                |         |                                   |
|                     | <u></u>       |                  | <b></b> |                                  | <u> </u>    |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     | 0.00          |                  |         | Total DSEs                       | 0.00        |                |         | otal DSEs                         |
|                     | 0.00          | \$               | d Group | Gross Receipts Secon             | 0.00        | \$             | roup    | Gross Receipts First G            |
|                     |               | _                |         |                                  |             |                |         |                                   |
|                     | 0.00          | \$               | d Group | Base Rate Fee Second             | 0.00        | \$             | roup    | Base Rate Fee First Gi            |
|                     | <u>'</u>      |                  |         |                                  | •           |                |         |                                   |
|                     |               | SUBSCRIBER GROUI | TWELVTH | ii —                             |             | SUBSCRIBER GRO | LEVENTH |                                   |
|                     | 0             |                  |         | COMMUNITY/ AREA                  | 0           |                |         | COMMUNITY/ AREA                   |
|                     | DSE           | CALL SIGN        | DSE     | CALL SIGN                        | DSE         | CALL SIGN      | DSE     | CALL SIGN                         |
|                     | 502           | OF REE STORY     | 562     | O'ALL SIGH                       | 562         | OF ILLE STORY  | 502     | O/ ILL GIGIT                      |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     | <mark></mark> | <br>             |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  | <u> </u>    |                |         |                                   |
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|                     |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     |               |                  |         |                                  |             |                |         |                                   |
|                     | 0.00          |                  |         | Total DSEs                       | 0.00        |                |         | Fotal DSEs                        |
|                     | -             |                  | Group   |                                  |             |                | Stoup   |                                   |
|                     | 0.00          | \$               | Group   | Total DSEs Gross Receipts Fourth | 0.00        | \$             | Group   |                                   |
|                     | -             | \$<br>\$         |         |                                  |             | \$<br>\$       |         | Total DSEs Gross Receipts Third G |

| LEGAL NAME OF OWNER Nortex Communica              |         |                                   |             |                          |           | S  | YSTEM ID#<br>5984 | Name              |
|---|---------|-----------------------------------|-------------|--------------------------|-----------|--|-------------------|-------------------|
|   |         | COMPUTATION OF<br>SUBSCRIBER GROU |             | ATE FEES FOR EACH        |           | BER GROUP<br>SUBSCRIBER GROUP                | )                 | ^                 |
| COMMUNITY/ AREA                                   |         |                                   | 0           | COMMUNITY/ AREA          |           |  | 0                 | 9<br>Computation  |
| CALL SIGN   | DSE     | CALL SIGN                         | DSE         | CALL SIGN                | DSE       | CALL SIGN                                    | DSE               | of                |
|   |         |                                   |             |                          |           |  |                   | Base Rate Fee and |
|   |         |                                   |             |                          | ···       |  |                   | Syndicated        |
|   |         |                                   |             |                          |           |  |                   | Exclusivity       |
|   |         |                                   |             |                          |           |  |                   | Surcharge<br>for  |
|   |         |                                   |             |                          | ···       | . -  |                   | Partially         |
|   |         |                                   |             |                          |           |  |                   | Distant           |
|   |         |                                   |             |                          |           | <u>                                     </u> |                   | Stations          |
|   |         |                                   |             |                          |           |  |                   |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
|   |         |                                   | ļ           |                          |           |  | <u> </u>          |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
| Total DSEs  |         |                                   | 0.00        | Total DSEs               |           |  | 0.00              |                   |
| Gross Receipts First Gr                           | oup     | \$                                | 0.00        | Gross Receipts Secon     | nd Group  | \$   | 0.00              |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
| Base Rate Fee First Gr                            |         | \$                                | 0.00        | Base Rate Fee Secon      |           | \$   | 0.00              |                   |
| COMMUNITY/ AREA                                   | FIEENIH | SUBSCRIBER GROU                   | <b>0</b>    | COMMUNITY/ AREA          | SIXTEENTH | SUBSCRIBER GROUP                             | 0                 |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
| CALL SIGN   | DSE     | CALL SIGN                         | DSE         | CALL SIGN                | DSE       | CALL SIGN                                    | DSE               |                   |
|   |         |                                   |             |                          | ···       |  |                   |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
|   |         |                                   | <u> </u>    |                          |           |  |                   |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
|   |         |                                   | <u> </u>    |                          |           |  |                   |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
|   |         |                                   |             |                          |           |  |                   |                   |
| Total DSEs  |         |                                   | 0.00        | Total DSEs               |           |  | 0.00              |                   |
| Gross Receipts Third G                            | roup    | \$                                | 0.00        | Gross Receipts Fourth    | n Group   | \$   | 0.00              |                   |
| Base Rate Fee Third G                             | roup    | \$                                | 0.00        | Base Rate Fee Fourth     | n Group   | \$   | 0.00              |                   |
|   |         |                                   |             | Ш                        |           |  |                   |                   |
| Base Rate Fee: Add the<br>Enter here and in block |         |                                   | ber group a | as shown in the boxes al | bove.     | \$   |                   |                   |
|   |         |                                   |             |                          |           |  | -                 |                   |

| LEGAL NAME OF OWNER Nortex Communica              |          |                 |                |                          |                   | S                | 7STEM ID#<br>5984 | Name                     |
|---|----------|-----------------|----------------|--------------------------|-------------------|------------------|-------------------|--------------------------|
|   |          |                 |                | ATE FEES FOR EACH        |                   |                  |                   |                          |
| SEVEN<br>COMMUNITY/ AREA                          | NIEENTH  | SUBSCRIBER GROU | IP<br><b>0</b> | COMMUNITY/ AREA          | HIEENTH           | SUBSCRIBER GROUP | DSE               | 9                        |
| CALL SIGN   | DSE      | CALL SIGN       | DSE            | CALL SIGN                | DSE               | CALL SIGN        | DSE               | Computation of           |
|   |          |                 |                |                          |                   |                  |                   | Base Rate Fee            |
|   |          |                 |                |                          |                   | -                |                   | and                      |
|   |          |                 |                |                          |                   |                  |                   | Syndicated               |
|   |          |                 |                |                          |                   |                  |                   | Exclusivity<br>Surcharge |
|   |          |                 |                | -                        |                   |                  |                   | for                      |
|   |          |                 |                |                          |                   |                  |                   | Partially                |
|   |          |                 |                |                          |                   | -                |                   | Distant                  |
|   |          |                 |                |                          |                   |                  |                   | Stations                 |
|   | <b></b>  |                 |                | -                        |                   |                  |                   |                          |
|   | <b>-</b> |                 |                |                          |                   |                  | ···               |                          |
|   |          |                 |                |                          |                   |                  |                   |                          |
|   |          |                 |                |                          |                   |                  |                   |                          |
|   |          |                 |                |                          |                   |                  |                   |                          |
| Total DSEs  |          |                 | 0.00           | Total DSEs               |                   |                  | 0.00              |                          |
| Gross Receipts First Gro                          | oup      | \$              | 0.00           | Gross Receipts Secon     | d Group           | \$               | 0.00              |                          |
| Base Rate Fee First Gro                           | oup      | \$              | 0.00           | Base Rate Fee Secon      | d Group           | \$               | 0.00              |                          |
| NIN   | NTEENTH  | SUBSCRIBER GROU | IP             | Т                        | WENTIETH          | SUBSCRIBER GROUP | )                 |                          |
| COMMUNITY/ AREA                                   |          |                 | 0              | COMMUNITY/ AREA          | \$ 0.00   \$ 0.00 | 0                |                   |                          |
| CALL SIGN   | DSE      | CALL SIGN       | DSE            | CALL SIGN                | DSE               | CALL SIGN        | DSE               |                          |
|   |          |                 |                |                          |                   |                  |                   |                          |
|   |          |                 |                |                          | <u></u>           |                  |                   |                          |
|   |          |                 |                |                          | <u> </u>          |                  | <u> </u>          |                          |
|   |          |                 |                |                          |                   |                  |                   |                          |
|   |          |                 |                |                          |                   | -                |                   |                          |
|   | ļ        |                 |                |                          |                   |                  |                   |                          |
|   | <u></u>  |                 |                | -                        | <del></del>       |                  | <u></u>           |                          |
|   |          |                 |                |                          | <b>-</b>          |                  | <u> </u>          |                          |
|   |          |                 |                |                          |                   |                  |                   |                          |
|   | ļ        |                 |                |                          |                   |                  |                   |                          |
|   | ļ        |                 |                |                          |                   |                  |                   |                          |
|   | <u></u>  |                 |                | -                        | <del></del>       |                  | <u></u>           |                          |
| Total DSEs  | 1        |                 | 0.00           | Total DSEs               | 1                 |                  | 0.00              |                          |
| Gross Receipts Third Gr                           | roup     | \$              | 0.00           | Gross Receipts Fourth    | Group             | \$               | 0.00              |                          |
| Base Rate Fee Third Gr                            | roup     | \$              | 0.00           | Base Rate Fee Fourth     | Group             | \$               | 0.00              |                          |
|   |          |                 |                | II                       |                   |                  |                   |                          |
| Base Rate Fee: Add the<br>Enter here and in block |          |                 | iber group a   | as shown in the boxes ab | oove.             | \$               |                   |                          |

| LEGAL NAME OF OWNER Nortex Communica |           |                       |             |                          |          | SYS              | 5984 | Name             |
|--------------------------------------|-----------|-----------------------|-------------|--------------------------|----------|------------------|------|------------------|
| BI                                   | LOCK A:   | COMPUTATION OF        | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP        |      |                  |
|                                      |           | SUBSCRIBER GROU       |             | III                      |          | SUBSCRIBER GROUP |      | _                |
| COMMUNITY/ AREA                      |           |                       | 0           | COMMUNITY/ AREA          |          |                  | 0    | 9<br>Computation |
| CALL SIGN                            | DSE       | CALL SIGN             | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE  | of               |
| 07.122 0.011                         | 302       | 07.22 0.0.1           |             | 0,122 0.011              | 332      | 57 LEZ 575.1     | 332  | Base Rate Fee    |
|                                      |           |                       |             |                          |          |                  |      | and              |
|                                      |           |                       |             |                          |          | _                |      | Syndicated       |
|                                      |           |                       |             |                          |          |                  |      | Exclusivity      |
|                                      |           |                       |             |                          |          |                  |      | Surcharge        |
|                                      |           |                       |             |                          |          |                  |      | for              |
|                                      |           |                       |             |                          |          |                  |      | Partially        |
|                                      |           |                       |             |                          | <b></b>  |                  |      | -                |
|                                      |           |                       |             |                          |          |                  |      | Distant          |
|                                      |           |                       |             |                          |          |                  |      | Stations         |
|                                      |           |                       |             |                          | <b></b>  | _                |      |                  |
|                                      | <b> </b>  |                       |             |                          | ļ        |                  |      |                  |
|                                      | <b></b>   |                       |             |                          |          |                  |      |                  |
|                                      | ļ         |                       |             |                          | <b></b>  |                  |      |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
| Total DSEs                           |           | -                     | 0.00        | Total DSEs               |          |                  | 0.00 |                  |
| Gross Receipts First Gro             | oup       | \$                    | 0.00        | Gross Receipts Second    | d Group  | \$               | 0.00 |                  |
| Base Rate Fee First Gro              | oup       | \$                    | 0.00        | Base Rate Fee Second     | d Group  | \$               | 0.00 |                  |
| TWENT                                | Y-THIRD   | SUBSCRIBER GROU       | Р           | TWENT                    | /-FOURTH | SUBSCRIBER GROUP |      |                  |
| COMMUNITY/ AREA                      |           |                       | 0           | COMMUNITY/ AREA          |          |                  | 0    |                  |
| CALL SIGN                            | DSE       | CALL SIGN             | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE  |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
|                                      | <u>[</u>  |                       |             |                          |          |                  |      |                  |
|                                      | [ ]       |                       |             |                          |          |                  |      |                  |
|                                      | <u> </u>  |                       |             |                          |          |                  |      |                  |
|                                      | <u> </u>  |                       |             |                          |          |                  |      |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
|                                      | <u> </u>  |                       |             |                          |          |                  |      |                  |
|                                      | <u> </u>  |                       |             |                          |          |                  |      |                  |
|                                      | <u> </u>  |                       |             |                          |          |                  |      |                  |
|                                      |           |                       |             |                          |          |                  |      |                  |
| Total DSEs                           |           |                       | 0.00        | Total DSEs               |          |                  | 0.00 |                  |
| Gross Receipts Third Gr              | oup       | \$                    | 0.00        | Gross Receipts Fourth    | Group    | \$               | 0.00 |                  |
| Base Rate Fee Third Gr               | oup       | \$                    | 0.00        | Base Rate Fee Fourth     | Group    | \$               | 0.00 |                  |
| Base Rate Fee: Add the               | hasa rata | foos for each subseri | her group a | as shown in the hoves sh | ove      |                  |      |                  |
| Enter here and in block 3            |           |                       | oor group a | SHOWITHI HIE DUNES AD    | OVG.     | \$               |      |                  |

| LEGAL NAME OF OWNER Nortex Communica                |          |                                |             |                          |  | S                             | STEM ID#<br>5984     | Name             |
|---|----------|--------------------------------|-------------|--------------------------|--|-------------------------------|----------------------|------------------|
|   |          | COMPUTATION OF SUBSCRIBER GROU |             | ATE FEES FOR EACH        |  | BER GROUP<br>SUBSCRIBER GROUP | <b>D</b>             |                  |
| COMMUNITY/ AREA                                     |          |                                | 0           | COMMUNITY/ AREA          |  |                               | 0.00<br>0.00<br>0.00 | 9<br>Computation |
| CALL SIGN   | DSE      | CALL SIGN                      | DSE         | CALL SIGN                | DSE  | CALL SIGN                     | DSE                  | of               |
|   |          |                                |             |                          |  |                               |                      | Base Rate Fee    |
|   |          |                                |             |                          |  |                               |                      | and              |
|   |          |                                |             |                          |  |                               |                      | Syndicated       |
|   |          |                                |             |                          |  |                               |                      | Exclusivity      |
|   |          |                                |             |                          |  |                               |                      | Surcharge<br>for |
|   |          |                                |             |                          |  |                               |                      | Partially        |
|   |          |                                |             |                          |  |                               |                      | Distant          |
|   |          |                                |             |                          |  |                               |                      | Stations         |
|   |          |                                |             |                          |  |                               |                      |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
|   | ļ        |                                |             |                          | <u> </u>   |                               |                      |                  |
|   | -        |                                |             |                          | <u> </u>   |                               |                      |                  |
|   |          |                                |             |                          | <del>-</del>   |                               | <u></u>              |                  |
| T-4-1 DOE   |          | U.                             | 0.00        | T-4-1 DO5                | 1  | L!                            | 0.00                 |                  |
| Total DSEs  |          |                                | 0.00        |                          |  |                               |                      |                  |
| Gross Receipts First Gro                            | oup      | \$                             | 0.00        | Gross Receipts Secon     | d Group  | \$                            | 0.00                 |                  |
| Base Rate Fee First Gro                             | oup      | \$                             | 0.00        | Base Rate Fee Secon      | d Group  | \$                            | 0.00                 |                  |
| TWENTY-S  | SEVENTH  | SUBSCRIBER GROU                | Р           | TWEN                     | TY-EIGHTH  | SUBSCRIBER GROUP              | )                    |                  |
| COMMUNITY/ AREA                                     |          |                                | 0           | COMMUNITY/ AREA          | \$ 0.00  Stase Rate Fee Second Group  TWENTY-EIGHTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 | 0                             |                      |                  |
| CALL SIGN   | DSE      | CALL SIGN                      | DSE         | CALL SIGN                | DSE  | CALL SIGN                     | DSE                  |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
|   | <u> </u> |                                |             |                          |  |                               |                      |                  |
|   | <b> </b> |                                |             |                          |  |                               |                      |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
|   |          |                                |             |                          | <del>-</del>   |                               | <u></u>              |                  |
|   |          |                                | ļ           |                          | -  |                               | <u>-</u>             |                  |
|   | <b>+</b> |                                |             |                          | <b></b>  |                               | <u> </u>             |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
| Total DSEs  |          |                                | 0.00        | Total DSEs               |  |                               | 0.00                 |                  |
| Gross Receipts Third Gr                             | oup      | \$                             | 0.00        | Gross Receipts Fourth    | Group  | \$                            | 0.00                 |                  |
| Base Rate Fee Third Gr                              | oup      | \$                             | 0.00        | Base Rate Fee Fourth     | Group  | \$                            | 0.00                 |                  |
|   |          |                                |             |                          |  |                               |                      |                  |
| Base Rate Fee: Add the<br>Enter here and in block 3 |          |                                | per group a | as snown in the boxes ab | ove.   | \$                            |                      |                  |

| LEGAL NAME OF OWNER Nortex Communica           |          |                                   |             |  |             | SY                            | STEM ID# 5984 | Name              |
|--|----------|-----------------------------------|-------------|--|-------------|-------------------------------|---------------|-------------------|
| TWENT  |          | COMPUTATION OF<br>SUBSCRIBER GROU | Р           | ii e   |             | BER GROUP<br>SUBSCRIBER GROUP |               | 9                 |
| COMMUNITY/ AREA                                |          |                                   | 0           | COMMUNITY/ AREA  |             |                               | GROUP 0       | Computation       |
| CALL SIGN                                      | DSE      | CALL SIGN                         | DSE         | CALL SIGN  | DSE         | CALL SIGN                     | DSE           | of                |
|  |          |                                   |             |  |             |                               |               | Base Rate Fee     |
|  |          |                                   |             |  | <u></u>     |                               |               | and<br>Syndicated |
|  |          |                                   |             |  |             |                               |               | Exclusivity       |
|  |          |                                   |             |  |             |                               |               | Surcharge         |
|  |          |                                   |             |  | <u></u>     |                               |               | for<br>Partially  |
|  |          |                                   |             |  | <del></del> |                               |               | Distant           |
|  |          |                                   |             |  |             |                               |               | Stations          |
|  | <u> </u> |                                   |             |  |             |                               | _             |                   |
|  | <u></u>  |                                   | l           |  |             |                               |               |                   |
|  |          |                                   |             |  |             |                               |               |                   |
|  | <u> </u> |                                   |             |  |             |                               |               |                   |
|  | <u> </u> |                                   |             |  |             | Ш                             |               |                   |
| Total DSEs                                     |          |                                   | 0.00        |  |             |                               |               |                   |
| Gross Receipts First Gro                       | oup      | \$                                | 0.00        | Gross Receipts Secon   | d Group     | \$                            | 0.00          |                   |
| Base Rate Fee First Gro                        |          | \$                                | 0.00        |  |             | \$                            | _             |                   |
|  | TY-FIRST | SUBSCRIBER GROU                   |             | ii .   | Y-SECOND    | SUBSCRIBER GROUP              |               |                   |
| COMMUNITY/ AREA                                |          |                                   | 0           | Gross Receipts Second Group \$ 0.00  Base Rate Fee Second Group \$ 0.00  THIRTY-SECOND SUBSCRIBER GROUP  COMMUNITY/ AREA 0 | U           |                               |               |                   |
| CALL SIGN                                      | DSE      | CALL SIGN                         | DSE         | CALL SIGN  | DSE         | CALL SIGN                     | DSE           |                   |
|  |          |                                   |             |  |             |                               |               |                   |
|  |          |                                   |             |  | ···         |                               | <u></u>       |                   |
|  |          |                                   |             |  |             |                               |               |                   |
|  |          |                                   |             |  |             |                               |               |                   |
|  |          |                                   |             |  |             |                               |               |                   |
|  |          |                                   |             |  |             |                               |               |                   |
|  |          |                                   |             |  |             |                               |               |                   |
|  |          |                                   | <u> </u>    |  |             |                               |               |                   |
|  |          |                                   |             |  |             |                               |               |                   |
|  |          |                                   |             |  |             |                               |               |                   |
|  | <u> </u> |                                   |             |  |             |                               | -             |                   |
| Total DSEs                                     |          |                                   | 0.00        | Total DSEs   |             |                               | 0.00          |                   |
| Gross Receipts Third Gr                        | oup      | \$                                | 0.00        | Gross Receipts Fourth  | Group       | \$                            | 0.00          |                   |
| Base Rate Fee Third Gr                         | oup      | \$                                | 0.00        | Base Rate Fee Fourth   | Group       | \$                            | 0.00          |                   |
| Page Pate Foc. Add 41-                         | hace ret | fooe for each subsection          | hor grows   | as shown in the haves  | 2010        |                               |               |                   |
| Base Rate Fee: Add the Enter here and in block |          |                                   | pei gioup a | ao onown in the boxes at   | ve.         | \$                            |               |                   |

| LEGAL NAME OF OWNER Nortex Communic              |           |                                   |                |                          |  | S                             | YSTEM ID#<br><b>5984</b> | Name                |
|--|-----------|-----------------------------------|----------------|--------------------------|--|-------------------------------|--------------------------|---------------------|
| THIR   |           | COMPUTATION OF<br>SUBSCRIBER GROU | IP             | ii e                     |  | BER GROUP<br>SUBSCRIBER GROUI |                          | 9                   |
| COMMUNITY/ AREA                                  |           |                                   | 0              | COMMUNITY/ AREA          |  |                               | 0 DSE                    | Computation         |
| CALL SIGN  | DSE       | CALL SIGN                         | DSE            | CALL SIGN                | DSE  | CALL SIGN                     | DSE                      | of                  |
|  |           |                                   |                |                          |  |                               |                          | Base Rate Fee       |
|  |           |                                   |                |                          |  |                               |                          | and<br>Syndicated   |
|  |           |                                   |                |                          | ····   |                               |                          | Exclusivity         |
|  |           |                                   |                |                          |  |                               |                          | Surcharge           |
|  |           |                                   |                |                          |  |                               |                          | for                 |
|  |           |                                   |                |                          |  |                               |                          | Partially           |
|  |           |                                   |                |                          | <del> </del>   | H                             | <del></del>              | Distant<br>Stations |
|  |           |                                   |                |                          |  |                               |                          |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
|  |           |                                   |                |                          | <u> </u>   |                               |                          |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
| Total DSEs                                       | -         |                                   | 0.00           | Total DSEs               | -1   | 1.1                           | 0.00                     |                     |
|  |           |                                   |                |                          | 1.0  |                               |                          |                     |
| Gross Receipts First Gr                          | roup      | \$                                | 0.00           | Gross Receipts Secon     | id Group   | \$                            | 0.00                     |                     |
| Base Rate Fee First Gr                           |           | \$                                | 0.00           |                          |  | \$                            |                          |                     |
|  | RTY-FIFTH | SUBSCRIBER GROU                   | 1P<br><b>0</b> | ii .                     | RTY-SIXTH  | SUBSCRIBER GROUI              |                          |                     |
| COMMUNITY/ AREA                                  |           |                                   | U              | COMMUNITY/ AREA          | Receipts Second Group \$ 0.00  Rate Fee Second Group \$ 0.00  THIRTY-SIXTH SUBSCRIBER GROUP MUNITY/ AREA 0 |                               |                          |                     |
| CALL SIGN  | DSE       | CALL SIGN                         | DSE            | CALL SIGN                | DSE  | CALL SIGN                     | DSE                      |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
|  |           |                                   |                |                          | ···  |                               |                          |                     |
|  |           |                                   |                |                          |  | -                             |                          |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
|  |           |                                   |                |                          | <del></del>  |                               |                          |                     |
|  |           |                                   | ļ              |                          |  |                               |                          |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
|  |           |                                   | ļ              |                          | <del></del>  |                               |                          |                     |
|  |           |                                   |                |                          |  |                               |                          |                     |
| Total DSEs                                       |           |                                   | 0.00           | Total DSEs               |  |                               | 0.00                     |                     |
| Gross Receipts Third G                           | roup      | \$                                | 0.00           | Gross Receipts Fourth    | n Group  | \$                            | 0.00                     |                     |
| Base Rate Fee Third G                            | Group     | \$                                | 0.00           | Base Rate Fee Fourth     | ı Group  | \$                            | 0.00                     |                     |
|  |           |                                   |                | Ш                        |  |                               |                          |                     |
| Base Rate Fee: Add th<br>Enter here and in block |           |                                   | iber group a   | as shown in the boxes at | oove.  | \$                            |                          |                     |
| i  |           |                                   |                |                          |  |                               |                          |                     |

| LEGAL NAME OF OWNER Nortex Communica                |           |                                   |             |   |          | SY                            | 'STEM ID#<br>5984                               | Name              |
|---|-----------|-----------------------------------|-------------|---|----------|-------------------------------|---|-------------------|
|   |           | COMPUTATION OF<br>SUBSCRIBER GROU |             | ATE FEES FOR EACH   |          | BER GROUP<br>SUBSCRIBER GROUP | )   | 0                 |
| COMMUNITY/ AREA                                     |           |                                   | 0           | COMMUNITY/ AREA   |          |                               | GROUP  DSE  0  0  0  0  0  0  0 0 0 0 0 0 0 0 0 | 9<br>Computation  |
| CALL SIGN   | DSE       | CALL SIGN                         | DSE         | CALL SIGN   | DSE      | CALL SIGN                     | DSE   | of                |
|   |           |                                   |             |   |          |                               |   | Base Rate Fee and |
|   |           |                                   |             |   |          |                               | ···   | Syndicated        |
|   |           |                                   |             |   |          |                               |   | Exclusivity       |
|   |           |                                   |             |   |          |                               |   | Surcharge<br>for  |
|   |           |                                   |             | -   |          |                               | ···   | Partially         |
|   |           |                                   |             |   |          |                               |   | Distant           |
|   |           |                                   |             |   |          |                               |   | Stations          |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   |             |   |          |                               | -   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
| Total DSEs  |           |                                   | 0.00        | Total DSEs  |          |                               | 0.00  |                   |
| Gross Receipts First Gro                            | oup       | \$                                | 0.00        | Gross Receipts Second   | d Group  | \$                            | 0.00  |                   |
|   |           |                                   |             |   |          |                               |   |                   |
| Base Rate Fee First Gro                             |           | \$                                | 0.00        |   |          | \$                            | _   |                   |
| COMMUNITY/ AREA                                     | Y-NIN I H | SUBSCRIBER GROU                   | <u>Р</u>    |   | FORTIETH | SUBSCRIBER GROUP              | _   |                   |
|   |           |                                   |             | Total DSEs Gross Receipts Second Group  Base Rate Fee Second Group  FORTIETH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 |          |                               |   |                   |
| CALL SIGN   | DSE       | CALL SIGN                         | DSE         | CALL SIGN   | DSE      | CALL SIGN                     | DSE   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   | <u> </u>    |   |          |                               | -   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
|   |           |                                   |             |   |          |                               | -   |                   |
|   |           |                                   |             |   |          |                               |   |                   |
| Total DSEs  |           |                                   | 0.00        | Total DSEs  |          |                               | 0.00  |                   |
| Gross Receipts Third Gr                             | oup       | \$                                | 0.00        | Gross Receipts Fourth   | Group    | \$                            | 0.00  |                   |
| Base Rate Fee Third Gr                              | oup       | \$                                | 0.00        | Base Rate Fee Fourth  | Group    | \$                            | 0.00  |                   |
|   |           |                                   |             | Ш   |          |                               |   |                   |
| Base Rate Fee: Add the<br>Enter here and in block 3 |           |                                   | ber group a | as shown in the boxes ab  | ove.     | \$                            |   |                   |

|                |  | BER GROUP       | SUBSCRI  | TE FEES FOR EACH      | BASE RA | COMPUTATION O   | LOCK A:  | В                        |
|----------------|--|-----------------|----------|-----------------------|---------|-----------------|----------|--------------------------|
| 9              |  | SUBSCRIBER GROU | Y-SECOND |                       |         | SUBSCRIBER GROU | TY-FIRST |                          |
| Computa        | 0  |                 |          | COMMUNITY/ AREA       | 0       |                 |          | COMMUNITY/ AREA          |
| of             | DSE  | CALL SIGN       | DSE      | CALL SIGN             | DSE     | CALL SIGN       | DSE      | CALL SIGN                |
| Base Rate      |  |                 |          |                       |         |                 |          |                          |
| and            |  |                 |          |                       |         |                 | <u> </u> |                          |
| Syndica        |  |                 |          |                       |         |                 |          |                          |
| Exclusiv       |  |                 |          |                       |         |                 |          |                          |
| Surchar<br>for |  |                 |          |                       |         |                 | <b>.</b> |                          |
| Partial        |  |                 |          |                       |         |                 |          |                          |
| Distar         |  |                 |          |                       |         |                 |          |                          |
| Station        |  |                 |          |                       |         |                 |          |                          |
|                |  |                 |          |                       |         |                 |          |                          |
|                |  |                 |          |                       |         |                 | <b></b>  |                          |
|                |  |                 |          |                       |         |                 |          |                          |
|                |  |                 | -        |                       |         |                 | <b>-</b> |                          |
|                |  |                 |          |                       |         |                 |          |                          |
|                | 0.00   |                 |          | Total DSEs            | 0.00    |                 |          | otal DSEs                |
|                | 0.00   | •               | d Group  | Gross Receints Second | 0.00    | ¢               | מוור     | Gross Receipts First Gro |
|                | 0.00   | •               | и Огоир  | Oross Receipts Second | 0.00    | <b>4</b>        | Jup      | ross receipts i list on  |
|                | 0.00   | \$              | d Group  | Base Rate Fee Second  | 0.00    | \$              | oup      | ase Rate Fee First Gro   |
|                | IP   | SUBSCRIBER GROU | Y-FOURTH | FORT                  | JP      | SUBSCRIBER GROU | TY-THIRD | FOR <sup>-</sup>         |
|                | 0  |                 |          | COMMUNITY/ AREA       | 0       |                 |          | COMMUNITY/ AREA          |
|                | Second Group   Seco |                 |          |                       |         |                 |          |                          |
|                | DSE  | CALL SIGN       | DSE      | CALL SIGN             | DSE     | CALL SIGN       | DSE      | CALL SIGN                |
|                |  |                 |          |                       |         |                 | <u>.</u> |                          |
|                |  |                 |          |                       |         |                 | <b>-</b> |                          |
|                |  |                 |          |                       |         |                 | <b></b>  |                          |
|                |  |                 |          |                       |         |                 |          |                          |
|                |  |                 |          |                       |         |                 |          |                          |
|                |  |                 |          |                       |         |                 | <u> </u> |                          |
|                |  |                 |          |                       |         |                 | <b>.</b> |                          |
|                |  | H               |          |                       |         |                 |          |                          |
|                |  |                 |          |                       |         |                 |          |                          |
|                |  |                 |          |                       |         |                 |          |                          |
|                |  |                 |          |                       |         |                 |          |                          |
|                |  |                 |          |                       |         |                 |          |                          |
|                | 0.00   |                 | <u> </u> | Total DSEs            | 0.00    |                 |          | otal DSEs                |
|                | 0.00   | <u> </u>        | Group    | Gross Receipts Fourth | 0.00    |                 | oup      | Gross Receipts Third G   |
|                |  |                 |          |                       |         | -               | •        |                          |
|                | <del></del>  |                 |          |                       | 1       |                 |          |                          |

| LEGAL NAME OF OWNER Nortex Communica |               |                 |             |                          |   | S                | YSTEM ID#<br>5984 | Name                 |
|--------------------------------------|---------------|-----------------|-------------|--------------------------|---|------------------|-------------------|----------------------|
| В                                    | LOCK A:       | COMPUTATION OF  | BASE RA     | ATE FEES FOR EACH        | SUBSCRI   | BER GROUP        |                   |                      |
|                                      |               | SUBSCRIBER GROU |             |                          |   | SUBSCRIBER GROUP | >                 | ^                    |
| COMMUNITY/ AREA                      |               |                 | 0           | COMMUNITY/ AREA          |   |                  | 0.00<br>0.00      | 9<br>Computation     |
| CALL SIGN                            | DSE           | CALL SIGN       | DSE         | CALL SIGN                | DSE   | CALL SIGN        | DSE               | of                   |
|                                      |               |                 |             |                          |   |                  |                   | Base Rate Fee        |
|                                      |               |                 |             |                          |   |                  |                   | and                  |
|                                      |               |                 |             |                          |   |                  |                   | Syndicated           |
|                                      |               |                 |             |                          |   |                  |                   | Exclusivity          |
|                                      |               |                 |             |                          |   |                  |                   | Surcharge            |
|                                      |               |                 |             |                          |   |                  |                   | for                  |
|                                      |               |                 |             |                          |   |                  |                   | Partially<br>Distant |
|                                      | <b></b>       |                 |             |                          | ···   | -                | ···               | Stations             |
|                                      |               |                 |             |                          | ···   | -                |                   | Gtationo             |
|                                      | <b>+</b>      |                 |             |                          | <u> </u>  |                  | <u> </u>          |                      |
|                                      |               |                 |             |                          |   |                  |                   |                      |
|                                      |               |                 |             |                          |   |                  |                   |                      |
|                                      | ļ             |                 |             |                          |   |                  |                   |                      |
|                                      | <u> </u>      |                 | <u> </u>    |                          |   |                  |                   |                      |
| Total DSEs                           |               |                 | 0.00        | Total DSEs               |   |                  | 0.00<br>0.00      |                      |
| Gross Receipts First Gro             | oup           | \$              | 0.00        | Gross Receipts Secon     | d Group   | \$               | 0.00              |                      |
|                                      |               |                 |             |                          |   |                  |                   |                      |
| Base Rate Fee First Gro              | oup           | \$              | 0.00        | Base Rate Fee Secon      | d Group   | \$               | 0.00              |                      |
| FORTY-S                              | SEVENTH       | SUBSCRIBER GROU | Р           | FOR                      | TY-EIGHTH   | SUBSCRIBER GROUP | )                 |                      |
| COMMUNITY/ AREA                      |               |                 | 0           | COMMUNITY/ AREA          | sipts Second Group \$ 0.00  Fee Second Group \$ 0.00  FORTY-EIGHTH SUBSCRIBER GROUP  TY/ AREA 0 | 0                |                   |                      |
| CALL SIGN                            | DSE           | CALL SIGN       | DSE         | CALL SIGN                | DSE   | CALL SIGN        | DSE               |                      |
|                                      |               |                 |             |                          |   |                  |                   |                      |
|                                      |               |                 |             |                          |   |                  |                   |                      |
|                                      |               |                 |             |                          |   | -                |                   |                      |
|                                      |               |                 |             |                          |   | -                |                   |                      |
|                                      |               |                 |             |                          |   |                  |                   |                      |
|                                      |               |                 |             |                          |   |                  |                   |                      |
|                                      | <b>.</b>      |                 |             |                          |   |                  |                   |                      |
|                                      | <b></b>       |                 |             |                          |   |                  |                   |                      |
|                                      | <b>_</b>      |                 | ļ           |                          |   | -                |                   |                      |
|                                      |               |                 |             |                          |   |                  |                   |                      |
|                                      | <del>-</del>  |                 |             |                          |   |                  | <del></del>       |                      |
|                                      | -             |                 |             |                          |   |                  |                   |                      |
|                                      | <b>†</b>      |                 |             |                          |   |                  | <u> </u>          |                      |
| Total DSEs                           |               |                 | 0.00        | Total DSEs               | •   | -                | 0.00              |                      |
| Gross Receipts Third G               | oup           | \$              | 0.00        | Gross Receipts Fourth    | Group   | \$               | 0.00              |                      |
|                                      | •             |                 |             |                          | •   |                  |                   |                      |
| Base Rate Fee Third Gr               | oup           | \$              | 0.00        | Base Rate Fee Fourth     | ı Group   | \$               | 0.00              |                      |
|                                      |               |                 |             | Ш                        |   |                  |                   |                      |
| Base Rate Fee: Add the               |               |                 | ber group a | as shown in the boxes at | oove.   | e                |                   |                      |
| Enter here and in block              | o, iiile 1, S | pace L (page /) |             |                          |   | Þ                |                   |                      |

| LEGAL NAME OF OWNER Nortex Communica |               |                                   |              |                          |          | S                             | YSTEM ID#<br>5984 | Name              |
|--------------------------------------|---------------|-----------------------------------|--------------|--------------------------|----------|-------------------------------|-------------------|-------------------|
|                                      |               | COMPUTATION OF<br>SUBSCRIBER GROU |              | ATE FEES FOR EACH        |          | BER GROUP<br>SUBSCRIBER GROUP | 0                 |                   |
| COMMUNITY/ AREA                      |               |                                   | 0            | COMMUNITY/ AREA          |          |                               | 0 DSE             | 9<br>Computation  |
| CALL SIGN                            | DSE           | CALL SIGN                         | DSE          | CALL SIGN                | DSE      | CALL SIGN                     | DSE               | of                |
|                                      |               |                                   |              |                          |          |                               |                   | Base Rate Fee and |
|                                      |               |                                   |              |                          |          |                               |                   | Syndicated        |
|                                      |               |                                   |              |                          |          |                               |                   | Exclusivity       |
|                                      |               |                                   |              |                          |          |                               |                   | Surcharge<br>for  |
|                                      |               |                                   |              |                          |          |                               |                   | Partially         |
|                                      |               |                                   |              |                          |          |                               |                   | Distant           |
|                                      |               |                                   |              |                          |          |                               |                   | Stations          |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      | -             |                                   |              |                          |          |                               | <u></u>           |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
| Total DSEs                           |               |                                   | 0.00         | Total DSEs               |          |                               | 0.00              |                   |
| Gross Receipts First Gro             | oup           | \$                                | 0.00         | Gross Receipts Secon     | nd Group | \$                            | 0.00              |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
| Base Rate Fee First Gro              |               | \$                                | 0.00         | Base Rate Fee Secon      |          | \$                            | <u>'</u>          |                   |
| COMMUNITY/ AREA                      | TY-FIRST      | SUBSCRIBER GROU                   | 0            | COMMUNITY/ AREA          | Y-SECOND | SUBSCRIBER GROUP              |                   |                   |
| CALL SIGN                            | DSE           | CALL SIGN                         | DSE          | CALL SIGN                | DSE      | CALL SIGN                     | DSF               |                   |
| O'ALL GIGIT                          | DOL           | O'ALL GIGIT                       | BOL          | SALE SIGH                | BGE      | O' LEE GIGIT                  | DOL               |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
|                                      |               |                                   |              |                          |          |                               |                   |                   |
| Total DSEs                           |               |                                   | 0.00         | Total DSEs               |          |                               | 0.00              |                   |
| Gross Receipts Third G               | roup          | \$                                | 0.00         | Gross Receipts Fourth    | n Group  | \$                            | 0.00              |                   |
| Base Rate Fee Third Gi               | roup          | \$                                | 0.00         | Base Rate Fee Fourth     | n Group  | \$                            | 0.00              |                   |
| Base Rate Fee: Add the               | e base rate   | e fees for each subscri           | iber group a | as shown in the boxes at | bove.    |                               |                   |                   |
| Enter here and in block              | 3, line 1, sր | pace L (page 7)                   |              |                          |          | \$                            |                   |                   |

| LEGAL NAME OF OWNER Nortex Communica             |          |                                   |             |                          |  | SY                            | STEM ID#<br>5984 | Name              |
|--|----------|-----------------------------------|-------------|--------------------------|--|-------------------------------|------------------|-------------------|
| FIF1   |          | COMPUTATION OF<br>SUBSCRIBER GROU | Р           | 11                       |  | BER GROUP<br>SUBSCRIBER GROUP |                  | 9                 |
| COMMUNITY/ AREA                                  |          |                                   | 0           | COMMUNITY/ AREA          |  |                               | 0.00<br>0.00     | Computation       |
| CALL SIGN  | DSE      | CALL SIGN                         | DSE         | CALL SIGN                | DSE  | CALL SIGN                     | DSE              | of                |
|  |          |                                   |             |                          |  |                               |                  | Base Rate Fee     |
|  |          |                                   |             |                          | <u></u>  |                               |                  | and<br>Syndicated |
|  |          |                                   |             |                          |  |                               |                  | Exclusivity       |
|  |          |                                   |             |                          |  |                               |                  | Surcharge         |
|  |          |                                   |             |                          | <u> </u>   |                               |                  | for<br>Partially  |
|  |          |                                   |             |                          | <u> </u>   | -                             |                  | Distant           |
|  |          |                                   |             |                          |  |                               |                  | Stations          |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  | <u> </u> |                                   | l           |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
| Total DSEs                                       |          |                                   | 0.00        | Total DSEs               |  |                               |                  |                   |
| Gross Receipts First Gro                         | oup      | \$                                | 0.00        | Gross Receipts Secon     | d Group  | \$                            | 0.00             |                   |
| Base Rate Fee First Gro                          | oup      | \$                                | 0.00        | Base Rate Fee Secon      | d Group  | \$                            | 0.00             |                   |
|  | TY-FIFTH | SUBSCRIBER GROU                   |             | ii .                     | FTY-SIXTH  | SUBSCRIBER GROUP              |                  |                   |
| COMMUNITY/ AREA                                  |          |                                   | 0           | COMMUNITY/ AREA          | ss Receipts Second Group \$ 0.00  e Rate Fee Second Group \$ 0.00  FIFTY-SIXTH SUBSCRIBER GROUP  MMUNITY/ AREA 0 | U                             |                  |                   |
| CALL SIGN  | DSE      | CALL SIGN                         | DSE         | CALL SIGN                | DSE  | CALL SIGN                     | DSE              |                   |
|  |          |                                   |             |                          | <u> </u>   |                               |                  |                   |
|  |          |                                   |             |                          | <u>-</u>   | -                             |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  |          |                                   |             |                          |  |                               |                  |                   |
|  | <u> </u> |                                   |             |                          |  |                               |                  |                   |
| Total DSEs                                       |          |                                   | 0.00        | Total DSEs               | 1  |                               | 0.00             |                   |
| Gross Receipts Third Gr                          | oup      | \$                                | 0.00        | Gross Receipts Fourth    | Group  | \$                            | 0.00             |                   |
| Base Rate Fee Third Gr                           | oup      | \$                                | 0.00        | Base Rate Fee Fourth     | Group  | \$                            | 0.00             |                   |
| D  | h        |                                   | 1           | 1                        |  |                               |                  |                   |
| Base Rate Fee: Add the Enter here and in block 3 |          |                                   | per group a | as snown in the boxes ab | oove.  | \$                            |                  |                   |

| LEGAL NAME OF OWNER Nortex Communica                |          |                 |             |                          |  | SY               | STEM ID#<br>5984 | Name                     |
|---|----------|-----------------|-------------|--------------------------|--|------------------|------------------|--------------------------|
|   |          |                 |             | ATE FEES FOR EACH        |  |                  |                  |                          |
| COMMUNITY/ AREA                                     | DEVENIH  | SUBSCRIBER GROU | 0           | COMMUNITY/ AREA          | I I-EIGHTH   | SUBSCRIBER GROUP | 0.00<br>0.00     | 9<br>Computation         |
| CALL SIGN   | DSE      | CALL SIGN       | DSE         | CALL SIGN                | DSE  | CALL SIGN        | DSE              | Computation of           |
|   |          |                 |             |                          |  |                  |                  | Base Rate Fee            |
|   |          |                 |             |                          |  |                  |                  | and                      |
|   |          |                 |             |                          |  |                  |                  | Syndicated               |
|   | <u></u>  |                 |             |                          | <u> </u>   |                  |                  | Exclusivity<br>Surcharge |
|   |          |                 |             |                          | <u> </u>   |                  | <u> </u>         | for                      |
|   |          |                 |             |                          |  |                  |                  | Partially                |
|   | ļ        |                 |             |                          |  | -                |                  | Distant                  |
|   |          |                 |             |                          |  |                  |                  | Stations                 |
|   |          |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   |          |                 | <u> </u>    |                          |  |                  |                  |                          |
| Total DSEs  |          |                 | 0.00        | Total DSEs               |  |                  | 0.00             |                          |
| Gross Receipts First Gro                            | oup      | \$              | 0.00        | Gross Receipts Secon     | d Group  | \$               | 0.00             |                          |
| Base Rate Fee First Gro                             | oup      | \$              | 0.00        | Base Rate Fee Secon      | d Group  | \$               | 0.00             |                          |
| FIFT  | ΓY-NINTH | SUBSCRIBER GROU | IP          |                          | SIXTIETH   | SUBSCRIBER GROUF | )                |                          |
| COMMUNITY/ AREA                                     |          |                 | 0           | COMMUNITY/ AREA          | \$ 0.00  se Second Group \$ 0.00  SIXTIETH SUBSCRIBER GROUP  // AREA 0 | 0                |                  |                          |
| CALL SIGN   | DSE      | CALL SIGN       | DSE         | CALL SIGN                | DSE  | CALL SIGN        | DSE              |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          | <u> </u>   |                  |                  |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   | ļ        |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   | <b>1</b> |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
|   |          |                 |             |                          | <u> </u>   |                  |                  |                          |
|   | <u></u>  |                 | ļ           |                          |  |                  |                  |                          |
| Total DSEs  |          |                 | 0.00        | Total DSEs               | •  |                  | 0.00             |                          |
| Gross Receipts Third Gr                             | roup     | \$              | 0.00        | Gross Receipts Fourth    | Group  | \$               | 0.00             |                          |
| Base Rate Fee Third Gr                              | oup      | \$              | 0.00        | Base Rate Fee Fourth     | Group  | \$               | 0.00             |                          |
|   |          |                 |             |                          |  |                  |                  |                          |
| Base Rate Fee: Add the<br>Enter here and in block : |          |                 | ber group a | as snown in the boxes at | oove.  | \$               |                  |                          |

| Name            |   |                 |              |   |  |                  |   |  |
|-----------------|---|-----------------|--------------|---|--|------------------|---|--|
|                 |   | BER GROUP       | SUBSCRI      | TE FEES FOR EACH  | F BASE RA  | COMPUTATION OF   | BLOCK A:                                    | E  |
| •               | JP  | SUBSCRIBER GROU | Y-SECOND     | SIXT  | UP   | SUBSCRIBER GROU  | XTY-FIRST                                   | SIX  |
| 9<br>Computa    | 0   |                 |              | COMMUNITY/ AREA   | 0  |                  |   | COMMUNITY/ AREA  |
| of              | DSE   | CALL SIGN       | DSE          | CALL SIGN   | DSE  | CALL SIGN        | DSE   | CALL SIGN  |
| Base Rate       |   | -               |              |   |  |                  |   |  |
| and             |   |                 |              |   |  |                  |   |  |
| Syndicat        |   |                 |              |   |  |                  |   |  |
| Exclusiv        |   |                 |              |   |  |                  |   |  |
| Surcharç<br>for |   |                 |              |   | <u></u>  |                  | ····  |  |
| Partially       |   | -               | •            |   | ····   |                  |   |  |
| Distant         |   | -               |              |   |  |                  |   |  |
| Stations        |   |                 |              |   |  |                  |   |  |
|                 |   |                 |              |   |  |                  |   |  |
|                 |   |                 |              |   |  |                  |   |  |
|                 |   |                 |              |   |  |                  |   |  |
|                 |   |                 | <u> </u>     |   |  |                  |   |  |
|                 |   |                 |              |   |  |                  |   |  |
|                 |   |                 |              |   |  |                  |   |  |
|                 | 0.00  |                 |              | Total DSEs  | 0.00   |                  |   | otal DSEs  |
|                 | 0.00  | \$              | d Group      | Gross Receipts Secon                                    | 0.00   | \$               | roup  | ross Receipts First Gr                                   |
|                 |   |                 |              |   |  |                  |   |  |
|                 |   |                 |              |   |  |                  |   |  |
|                 | 0.00  | \$              | d Group      | Base Rate Fee Secon                                     | 0.00   | \$               | roup  | Base Rate Fee First Gr                                   |
|                 | •   |                 |              |   |  | \$UBSCRIBER GROU |   |  |
|                 | 0.00 Base Rate Fee Second Group \$ 0.00  RIBER GROUP  SIXTY-FOURTH SUBSCRIBER GROUP  COMMUNITY/ AREA  0 |                 |              | SIX   |  |                  |   |  |
|                 | JP  |                 |              | SIX   | DUP  |                  |   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   |                  |   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX<br>COMMUNITY/ AREA                                   |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX<br>COMMUNITY/ AREA                                   |
|                 | JP <b>0</b>   | SUBSCRIBER GROU | Y-FOURTH     | SIX*  | 0<br>0   | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX  |
|                 | DSE   | SUBSCRIBER GROU | Y-FOURTH     | SIX* COMMUNITY/ AREA  CALL SIGN                         | DSE  | SUBSCRIBER GROU  | (TY-THIRD                                   | SIX COMMUNITY/ AREA  CALL SIGN                           |
|                 | DSE DSE DSO   | SUBSCRIBER GROU | y-FOURTH DSE | COMMUNITY/ AREA  CALL SIGN  Total DSEs                  | DSE DSE DOMESTICATION OF THE PROPERTY OF THE P | SUBSCRIBER GROU  | DSE DSE                                     | SIX COMMUNITY/ AREA  CALL SIGN  fotal DSEs               |
|                 | DSE   | SUBSCRIBER GROU | y-FOURTH DSE | SIX* COMMUNITY/ AREA  CALL SIGN                         | DSE  | SUBSCRIBER GROU  | DSE DSE                                     | SIX COMMUNITY/ AREA  CALL SIGN  Total DSEs               |
|                 | DSE   | SUBSCRIBER GROU | Y-FOURTH DSE | CALL SIGN  CALL SIGN  Total DSEs  Gross Receipts Fourth | DSE  | SUBSCRIBER GROU  | DSE DSF | CALL SIGN  CALL SIGN  Fotal DSEs  Gross Receipts Third G |
|                 | DSE DSE DSO   | SUBSCRIBER GROU | Y-FOURTH DSE | COMMUNITY/ AREA  CALL SIGN  Total DSEs                  | DSE DSE DOMESTICATION OF THE PROPERTY OF THE P | SUBSCRIBER GROU  | DSE DSF | SIX COMMUNITY/ AREA  CALL SIGN  Total DSEs               |

| LEGAL NAME OF OWNER Nortex Communica             |                                   |                                   |             |                          |           | SY                         | STEM ID# 5984 | Name                     |
|--|-----------------------------------|-----------------------------------|-------------|--------------------------|-----------|----------------------------|---------------|--------------------------|
|  |                                   | COMPUTATION OF<br>SUBSCRIBER GROU |             | ATE FEES FOR EACH        |           | BER GROUP SUBSCRIBER GROUF | ,             |                          |
| COMMUNITY/ AREA                                  | I Y-FIF I H                       | SUBSCRIBER GROU                   | 0           | COMMUNITY/ AREA          | X1Y-5IX1H | SUBSCRIBER GROUP           | 0             | 9                        |
| CALL SIGN  | DSE                               | CALL SIGN                         | DSE         | CALL SIGN                | DSE       | CALL SIGN                  | DSE           | Computation of           |
|  |                                   |                                   |             |                          |           |                            |               | Base Rate Fee            |
|  |                                   |                                   |             |                          |           |                            |               | and                      |
|  |                                   |                                   |             |                          |           |                            |               | Syndicated               |
|  |                                   |                                   |             |                          |           |                            |               | Exclusivity<br>Surcharge |
|  |                                   |                                   |             |                          |           |                            | ···           | for                      |
|  |                                   |                                   |             |                          |           |                            |               | Partially                |
|  |                                   |                                   |             |                          |           |                            |               | Distant                  |
|  |                                   |                                   |             |                          | <u> </u>  |                            |               | Stations                 |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           | Ш                          | <u> </u>      |                          |
| Total DSEs                                       |                                   |                                   | 0.00        | Total DSEs               |           |                            | 0.00          |                          |
| Gross Receipts First Gro                         | oup                               | \$                                | 0.00        | Gross Receipts Secon     | d Group   | \$                         | 0.00          |                          |
| Base Rate Fee First Gro                          | oup                               | \$                                | 0.00        | Base Rate Fee Second     | d Group   | \$                         | 0.00          |                          |
| SIXTY-S  | SEVENTH                           | SUBSCRIBER GROU                   | P           | SIXT                     | ry-eighth | SUBSCRIBER GROUP           | )             |                          |
| COMMUNITY/ AREA                                  |                                   |                                   | 0           | COMMUNITY/ AREA          |           |                            |               |                          |
| CALL SIGN  | DSE                               | CALL SIGN                         | DSE         | CALL SIGN                | DSE       | CALL SIGN                  | DSE           |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            | -             |                          |
|  | <b></b>                           |                                   |             |                          |           |                            | <u>-</u>      |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  |                                   |                                   |             |                          |           |                            |               |                          |
|  | •                                 |                                   |             |                          |           |                            |               |                          |
| Total DSEs                                       |                                   |                                   | 0.00        | Total DSEs               |           |                            | 0.00          |                          |
| Gross Receipts Third Gr                          | oup                               | \$                                | 0.00        | Gross Receipts Fourth    | Group     | \$                         | 0.00          |                          |
| Base Rate Fee Third Gr                           | Base Rate Fee Third Group \$ 0.00 |                                   |             | Base Rate Fee Fourth     | Group     | \$                         | 0.00          |                          |
| B B.: 5  |                                   |                                   |             |                          |           |                            |               |                          |
| Base Rate Fee: Add the Enter here and in block 3 |                                   |                                   | per group a | as snown in the boxes ab | ove.      | \$                         |               |                          |

| EGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |               |                 |               |                         |           |                 |      | Name                  |
|--|---------------|-----------------|---------------|-------------------------|-----------|-----------------|------|-----------------------|
| E  | BLOCK A:      | COMPUTATION O   | F BASE RA     | TE FEES FOR EACI        | H SUBSCR  | IBER GROUP      |      |                       |
| SIX  | TY-NINTH      | SUBSCRIBER GRO  | JP            | S                       | EVENTIETH | SUBSCRIBER GROU | JP   | 0                     |
| COMMUNITY/ AREA  |               |                 | 0             | COMMUNITY/ AREA         |           |                 | 0    | 9<br>Computat         |
| CALL SIGN  | DSE           | CALL SIGN       | DSE           | CALL SIGN               | DSE       | CALL SIGN       | DSE  | of                    |
|  |               |                 |               |                         |           |                 |      | Base Rate             |
|  |               |                 |               |                         |           |                 |      | and                   |
|  |               |                 |               |                         |           |                 |      | Syndicate             |
|  |               |                 |               |                         |           |                 |      | Exclusivi<br>Surcharg |
|  | ···           |                 | <del></del>   |                         |           |                 |      | for                   |
|  | <u></u>       |                 | <u></u>       |                         |           |                 |      | Partially             |
|  |               |                 |               |                         |           |                 |      | Distant               |
|  |               |                 |               |                         |           |                 |      | Stations              |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 | <u> </u>      |                         |           |                 |      |                       |
|  | <del></del>   |                 | <u></u>       |                         |           |                 |      |                       |
| otal DSEs  | ļ             | <del>!!</del>   | 0.00          | Total DSEs              |           | !!              | 0.00 |                       |
|  |               |                 |               |                         | 1.0       |                 |      |                       |
| ross Receipts First Gr   | oup           | \$              | 0.00          | Gross Receipts Seco     | nd Group  | \$              | 0.00 |                       |
| <b>ase Rate Fee</b> First Gr   | oup           | \$              | 0.00          | Base Rate Fee Seco      | nd Group  | \$              | 0.00 |                       |
| SEVEN  | ITY-FIRST     | SUBSCRIBER GRO  | JP            | SEVEN <sup>-</sup>      | TY-SECOND | SUBSCRIBER GROU | JP   |                       |
| OMMUNITY/ AREA   |               |                 | 0             | COMMUNITY/ AREA         |           |                 | 0    |                       |
| CALL SIGN  | DSE           | CALL SIGN       | DSE           | CALL SIGN               | DSE       | CALL SIGN       | DSE  |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 |               |                         | ••••      |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  | <u></u>       |                 |               |                         |           |                 |      |                       |
|  | <del></del>   |                 | <u></u>       |                         |           |                 |      |                       |
|  | <u></u>       |                 | <del></del>   |                         |           |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
|  |               |                 |               |                         |           |                 |      |                       |
| otal DSEs  |               |                 | 0.00          | Total DSEs              |           |                 | 0.00 |                       |
| ross Receipts Third G  | roup          | \$              | 0.00          | Gross Receipts Fourt    | h Group   | \$              | 0.00 |                       |
| <b>ase Rate Fee</b> Third G  | roup          | \$              | 0.00          | Base Rate Fee Fourt     | h Group   | \$              | 0.00 |                       |
|  |               |                 | 0.00          |                         |           | <u> </u>        | 3.00 |                       |
|  |               | _               |               |                         |           |                 |      |                       |
|  |               |                 | riber group a | as shown in the boxes a | bove.     |                 |      |                       |
| inter here and in block  | 3, line 1, s∣ | pace L (page 7) |               |                         |           | \$              |      |                       |

| LEGAL NAME OF OWNER Nortex Communica              |                                   |                                   |              |                          |  | S'                            | YSTEM ID#<br>5984 | Name                 |
|---|-----------------------------------|-----------------------------------|--------------|--------------------------|--|-------------------------------|-------------------|----------------------|
| SEVEN <sup>-</sup>                                |                                   | COMPUTATION OF<br>SUBSCRIBER GROU | IP           | ii e                     |  | BER GROUP<br>SUBSCRIBER GROUE |                   | 9                    |
| COMMUNITY/ AREA                                   |                                   |                                   | 0            | COMMUNITY/ AREA          |  |                               | 0                 | Computation          |
| CALL SIGN   | DSE                               | CALL SIGN                         | DSE          | CALL SIGN                | DSE                                    | CALL SIGN                     | DSE               | of                   |
|   |                                   |                                   |              |                          |  |                               |                   | Base Rate Fee        |
|   |                                   |                                   |              |                          |  |                               |                   | and<br>Syndicated    |
|   |                                   |                                   |              |                          | ······································ | -                             |                   | Exclusivity          |
|   |                                   |                                   |              |                          |  |                               |                   | Surcharge            |
|   |                                   |                                   |              |                          |  |                               |                   | for                  |
|   |                                   |                                   |              |                          |  |                               |                   | Partially<br>Distant |
|   |                                   |                                   |              |                          | ······································ | -                             |                   | Stations             |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
|   | ļ                                 |                                   |              |                          |  |                               |                   |                      |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
|   | <u>-</u>                          |                                   |              |                          |  |                               |                   |                      |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
| Total DSEs  |                                   |                                   | 0.00         | Total DSEs               |  |                               | 0.00              |                      |
| Gross Receipts First Gro                          | oup                               | \$                                | 0.00         | Gross Receipts Secon     | Gross Receipts Second Group \$ 0.00    |                               |                   |                      |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
| Base Rate Fee First Gro                           | oup                               | \$                                | 0.00         | Base Rate Fee Second     | d Group                                | \$                            | 0.00              |                      |
|   | TY-FIFTH                          | SUBSCRIBER GROU                   |              | ii .                     | NTY-SIXTH                              | SUBSCRIBER GROUP              |                   |                      |
| COMMUNITY/ AREA                                   |                                   |                                   | 0            | COMMUNITY/ AREA          | 0                                      |                               |                   |                      |
| CALL SIGN   | DSE                               | CALL SIGN                         | DSE          | CALL SIGN                | DSE                                    | CALL SIGN                     | DSE               |                      |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
|   | <u>_</u>                          |                                   |              |                          |  |                               |                   |                      |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
|   | <u> </u>                          |                                   | ļ            |                          |  |                               | <u> </u>          |                      |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
|   | <b>.</b>                          |                                   |              |                          |  |                               |                   |                      |
|   | <b> </b>                          |                                   |              |                          |  |                               |                   |                      |
|   | <b> </b>                          |                                   |              |                          |  |                               | <u> </u>          |                      |
|   | <u> </u>                          |                                   |              |                          |  |                               |                   |                      |
|   |                                   |                                   |              |                          |  |                               |                   |                      |
| Total DSEs  |                                   |                                   | 0.00         | Total DSEs               |  |                               | 0.00              |                      |
| Gross Receipts Third Gr                           | roup                              | \$                                | 0.00         | Gross Receipts Fourth    | Group                                  | \$                            | 0.00              |                      |
| Base Rate Fee Third G                             | Base Rate Fee Third Group \$ 0.00 |                                   |              | Base Rate Fee Fourth     | Group                                  | \$                            | 0.00              |                      |
|   |                                   |                                   |              | Ш                        |  |                               |                   |                      |
| Base Rate Fee: Add the<br>Enter here and in block |                                   |                                   | iber group a | as shown in the boxes ab | ove.                                   | \$                            |                   |                      |

| LEGAL NAME OF OWNER Nortex Communica              |             |                                   |              |                          |                                     | S                             | 7STEM ID#<br>5984 | Name              |
|---|-------------|-----------------------------------|--------------|--------------------------|-------------------------------------|-------------------------------|-------------------|-------------------|
|   |             | COMPUTATION OF<br>SUBSCRIBER GROU |              | ATE FEES FOR EACH        |                                     | BER GROUP<br>SUBSCRIBER GROUE | <b>D</b>          | •                 |
| COMMUNITY/ AREA                                   |             |                                   | 0            | COMMUNITY/ AREA          |                                     |                               | 0                 | 9<br>Computation  |
| CALL SIGN   | DSE         | CALL SIGN                         | DSE          | CALL SIGN                | DSE                                 | CALL SIGN                     | DSE               | of                |
|   |             |                                   |              |                          |                                     |                               |                   | Base Rate Fee and |
|   |             |                                   |              |                          | ···                                 |                               | <del></del>       | Syndicated        |
|   |             |                                   |              |                          |                                     |                               |                   | Exclusivity       |
|   |             |                                   |              |                          | <u> </u>                            |                               |                   | Surcharge<br>for  |
|   |             |                                   |              |                          | <u> </u>                            |                               | <del></del>       | Partially         |
|   |             |                                   |              |                          |                                     |                               |                   | Distant           |
|   |             |                                   |              |                          |                                     |                               |                   | Stations          |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
| Total DSEs  |             |                                   | 0.00         | Total DSEs               |                                     |                               | 0.00              |                   |
| Gross Receipts First Gr                           | oup         | \$                                | 0.00         | Gross Receipts Secon     | Gross Receipts Second Group \$ 0.00 |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
| Base Rate Fee First Gr                            |             | \$                                | 0.00         | Base Rate Fee Secon      |                                     | \$                            | 0.00              |                   |
| COMMUNITY/ AREA                                   | I Y-NIN I H | SUBSCRIBER GROU                   | 0            | COMMUNITY/ AREA          | EIGHTIETH                           | SUBSCRIBER GROUP              | 0                 |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
| CALL SIGN   | DSE         | CALL SIGN                         | DSE          | CALL SIGN                | DSE                                 | CALL SIGN                     | DSE               |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          | <u> </u>                            |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
|   |             |                                   |              |                          |                                     |                               |                   |                   |
| Total DSEs  |             |                                   | 0.00         | Total DSEs               |                                     |                               | 0.00              |                   |
| Gross Receipts Third G                            | roup        | \$                                | 0.00         | Gross Receipts Fourth    | Group                               | \$                            | 0.00              |                   |
| Base Rate Fee Third Group \$ 0.00                 |             |                                   | 0.00         | Base Rate Fee Fourth     | Group                               | \$                            | 0.00              |                   |
|   |             |                                   |              | П                        |                                     |                               |                   |                   |
| Base Rate Fee: Add the<br>Enter here and in block |             |                                   | iber group a | as shown in the boxes ab | oove.                               | \$                            |                   |                   |

| LEGAL NAME OF OWNER Nortex Communica             |             |                 |             |                          |          | SY               | STEM ID#<br>5984 | Name             |
|--|-------------|-----------------|-------------|--------------------------|----------|------------------|------------------|------------------|
| В  | LOCK A:     | COMPUTATION OF  | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP        |                  |                  |
|  |             | SUBSCRIBER GROU |             | III                      |          | SUBSCRIBER GROUP |                  | _                |
| COMMUNITY/ AREA                                  |             |                 | 0           | COMMUNITY/ AREA          |          |                  | 0                | 9<br>Computation |
| CALL SIGN  | DSE         | CALL SIGN       | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE              | of               |
| 07.122 0.0.1                                     | 202         | 07.22 0.0.1     | 302         | 57.122 5.51.1            | 202      | 0,122 0.011      | 302              | Base Rate Fee    |
|  |             |                 |             |                          |          |                  |                  | and              |
|  |             |                 |             |                          |          |                  |                  | Syndicated       |
|  |             |                 |             |                          |          |                  |                  | Exclusivity      |
|  |             |                 |             |                          |          | _                |                  | Surcharge        |
|  |             |                 |             |                          |          |                  |                  | for              |
|  |             |                 |             |                          |          |                  |                  | Partially        |
|  |             |                 |             |                          |          | _                |                  | Distant          |
|  |             |                 |             |                          |          |                  |                  | Stations         |
|  |             |                 |             |                          |          |                  |                  | 0                |
|  |             |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          | <u> </u>         |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
| Total DSEs                                       | <u> </u>    |                 | 0.00        | Total DSEs               | ļ        |                  | 0.00             |                  |
| Gross Receipts First Gro                         | מווס        | <b>\$</b>       | 0.00        | Gross Receipts Second    | d Group  | \$               | 0.00             |                  |
| Toross Rescripts 1 list ore                      | ,up         |                 | 0.00        | Gross receipts describ   | и Огоир  |                  | 0.00             |                  |
| Base Rate Fee First Gro                          | oup         | \$              | 0.00        | Base Rate Fee Second     | d Group  | \$               | 0.00             |                  |
| EIGHT  | Y-THIRD     | SUBSCRIBER GROU | Р           | EIGHT                    | Y-FOURTH | SUBSCRIBER GROUP |                  |                  |
| COMMUNITY/ AREA                                  |             |                 | 0           | COMMUNITY/ AREA          |          |                  |                  |                  |
| CALL SIGN  | DSE         | CALL SIGN       | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE              |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
|  | <u> </u>    |                 |             |                          |          |                  |                  |                  |
|  | <u> </u>    |                 |             |                          |          |                  |                  |                  |
|  | ļ           |                 |             |                          |          |                  |                  |                  |
|  | <u> </u>    |                 | <b></b>     |                          |          |                  |                  |                  |
|  | <u> </u>    |                 |             |                          |          |                  |                  |                  |
|  | ļ           |                 |             |                          |          |                  |                  |                  |
|  | ļ           |                 |             |                          |          |                  |                  |                  |
|  |             |                 |             |                          |          |                  |                  |                  |
| Total DSEs                                       |             |                 | 0.00        | Total DSEs               |          |                  | 0.00             |                  |
| Gross Receipts Third Gr                          | oup         | \$              | 0.00        | Gross Receipts Fourth    | Group    | \$               | 0.00             |                  |
| Base Rate Fee Third Gr                           | oup         | \$              | 0.00        | Base Rate Fee Fourth     | Group    | \$               | 0.00             |                  |
|  |             |                 |             | <u>II</u>                |          |                  |                  |                  |
| Base Rate Fee: Add the Enter here and in block 3 |             |                 | ber group a | as shown in the boxes ab | ove.     | s                |                  |                  |
|  | ر, ان ۱, ان | L (page 1)      |             |                          |          | <b>Y</b>         |                  |                  |

| LEGAL NAME OF OWNER Nortex Communica |           |                       |             |                           |          | SYS              | 5984 | Name             |
|--------------------------------------|-----------|-----------------------|-------------|---------------------------|----------|------------------|------|------------------|
| BI                                   | LOCK A:   | COMPUTATION OF        | BASE RA     | TE FEES FOR EACH          | SUBSCRI  | BER GROUP        |      |                  |
|                                      |           | SUBSCRIBER GROU       |             | (1)                       |          | SUBSCRIBER GROUP |      |                  |
| COMMUNITY/ AREA                      |           |                       | 0           | COMMUNITY/ AREA           |          |                  | 0    | 9<br>Computation |
| CALL SIGN                            | DSE       | CALL SIGN             | DSE         | CALL SIGN                 | DSE      | CALL SIGN        | DSE  | of               |
| 07.122 0.011                         | 302       | 07.22 0.0.1           |             | 07122 01011               | 332      | S/ILL SIGIT      | 332  | Base Rate Fee    |
|                                      |           |                       |             |                           |          |                  |      | and              |
|                                      |           |                       |             |                           |          | _                |      | Syndicated       |
|                                      |           |                       |             |                           |          | <u> </u>         |      | Exclusivity      |
|                                      |           |                       |             | -                         |          |                  |      | Surcharge        |
|                                      |           |                       |             |                           |          |                  |      | for              |
|                                      |           |                       |             |                           | <b></b>  |                  |      | Partially        |
|                                      |           |                       |             |                           | <b></b>  |                  |      | -                |
|                                      |           |                       |             |                           |          |                  |      | Distant          |
|                                      |           |                       |             |                           |          |                  |      | Stations         |
|                                      |           |                       |             |                           | <b></b>  | _                |      |                  |
|                                      | <b> </b>  |                       |             |                           | ļ        |                  |      |                  |
|                                      | <b></b>   |                       |             |                           |          |                  |      |                  |
|                                      | ļ         |                       |             |                           | <b></b>  |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
| Total DSEs                           |           |                       | 0.00        | Total DSEs                |          |                  | 0.00 |                  |
| Gross Receipts First Gro             | oup       | \$                    | 0.00        | Gross Receipts Second     | d Group  | \$               | 0.00 |                  |
| Base Rate Fee First Gro              | oup       | \$                    | 0.00        | Base Rate Fee Second      | d Group  | \$               | 0.00 |                  |
| EIGHTY-S                             | EVENTH    | SUBSCRIBER GROU       | Р           | EIGHT                     | Y-EIGHTH | SUBSCRIBER GROUP |      |                  |
| COMMUNITY/ AREA                      |           |                       | 0           | COMMUNITY/ AREA           |          |                  | 0    |                  |
| CALL SIGN                            | DSE       | CALL SIGN             | DSE         | CALL SIGN                 | DSE      | CALL SIGN        | DSE  |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
|                                      |           |                       |             |                           |          |                  |      |                  |
| Total DSEs                           |           |                       | 0.00        | Total DSEs                |          |                  | 0.00 |                  |
| Gross Receipts Third Gr              | oup       | \$                    | 0.00        | Gross Receipts Fourth     | Group    | \$               | 0.00 |                  |
| Base Rate Fee Third Gr               | oup       | \$                    | 0.00        | Base Rate Fee Fourth      | Group    | \$               | 0.00 |                  |
| Base Rate Fee: Add the               | hase rate | foos for each subseri | ner aroup a | as shown in the boyes ob  | ove      |                  |      |                  |
| Enter here and in block 3            |           |                       | oei gioup a | as shown in the boxes abo | OVG.     | \$               |      |                  |

|                 | EGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |                 |             |                                  |           |                |          |                              |
|-----------------|--|-----------------|-------------|----------------------------------|-----------|----------------|----------|------------------------------|
|                 |  | BER GROUP       | SUBSCRI     | TE FEES FOR EACH                 | F BASE RA | COMPUTATION C  | BLOCK A: | E                            |
| 0               | IP   | SUBSCRIBER GROU | NINTIETH    |                                  | JP        | SUBSCRIBER GRO | TY-NINTH | EIGH                         |
| 9<br>Computati  | 0  |                 |             | COMMUNITY/ AREA                  | 0         |                |          | COMMUNITY/ AREA              |
| of              | DSE  | CALL SIGN       | DSE         | CALL SIGN                        | DSE       | CALL SIGN      | DSE      | CALL SIGN                    |
| Base Rate       |  |                 |             |                                  |           |                |          |                              |
| and             |  |                 |             |                                  |           |                |          |                              |
| Syndicate       |  |                 |             |                                  |           |                |          |                              |
| Exclusivi       |  |                 |             |                                  |           |                |          |                              |
| Surcharg<br>for |  | H               |             |                                  |           |                |          |                              |
| Partially       |  |                 |             |                                  | <u>-</u>  |                |          |                              |
| Distant         |  |                 |             |                                  |           |                |          |                              |
| Stations        |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  | -               |             |                                  |           |                |          |                              |
|                 |  |                 | <b>-</b>    |                                  | <u>-</u>  |                |          |                              |
|                 |  |                 |             |                                  | <u> </u>  |                |          |                              |
|                 | 0.00   | •               | •           | Total DSEs                       | 0.00      | •              |          | otal DSEs                    |
|                 | 0.00   | e               | d Group     | Gross Receipts Secor             | 0.00      | •              | oup.     | ross Receipts First Gr       |
|                 | 0.00   | \$              | u Group     | Gloss Receipts Secon             | 0.00      | \$             | oup      | ross Receipts First Gr       |
|                 | 0.00   | \$              | d Group     | Base Rate Fee Secon              | 0.00      | \$             | oup      | <b>ase Rate Fee</b> First Gr |
|                 | IP   | SUBSCRIBER GROU | Y-SECOND    | NINET                            | UP        | SUBSCRIBER GRO | TY-FIRST | NINE                         |
|                 | 0  |                 |             | COMMUNITY/ AREA                  | 0         |                |          | OMMUNITY/ AREA               |
|                 | DSE  | CALL SIGN       | DSE         | CALL SIGN                        | DSE       | CALL SIGN      | DSE      | CALL SIGN                    |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             | 1                                |           |                |          |                              |
|                 |  |                 | <del></del> |                                  |           | 1              |          |                              |
|                 |  | -               |             |                                  | -         |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 |  |                 |             |                                  |           |                |          |                              |
|                 | 0.00   |                 |             | Total DSEs                       | 0.00      |                |          | otal DSEs                    |
|                 | 0.00   | \$              | Group       | Total DSEs Gross Receipts Fourth | 0.00      | \$             | Group    |                              |
|                 | _  | \$              | Group       |                                  |           | \$             | Group    | Total DSEs                   |
|                 | _  | \$              |             |                                  |           | \$             |          |                              |

|                     | lortex Communications Co. 5984 |                  |           |                                  |         |                 |             |                                     |  |  |
|---------------------|--------------------------------|------------------|-----------|----------------------------------|---------|-----------------|-------------|-------------------------------------|--|--|
|                     |                                |                  |           | TE FEES FOR EACH                 |         |                 |             |                                     |  |  |
| 9                   |                                | SUBSCRIBER GROUP | r-FOURTH  |                                  |         | SUBSCRIBER GROU | : I'Y-THIRD |                                     |  |  |
| Computat            | 0                              |                  |           | COMMUNITY/ AREA                  | 0       |                 |             | COMMUNITY/ AREA                     |  |  |
| of                  | DSE                            | CALL SIGN        | DSE       | CALL SIGN                        | DSE     | CALL SIGN       | DSE         | CALL SIGN                           |  |  |
| Base Rate           |                                |                  |           |                                  |         |                 |             |                                     |  |  |
| and                 |                                | _                |           |                                  |         |                 |             |                                     |  |  |
| Syndicat            |                                |                  |           |                                  |         |                 |             |                                     |  |  |
| Exclusiv<br>Surchar |                                |                  |           |                                  |         |                 |             |                                     |  |  |
| for                 |                                |                  |           |                                  |         |                 |             |                                     |  |  |
| Partiall            | ···                            |                  |           |                                  |         |                 |             |                                     |  |  |
| Distan              |                                |                  |           |                                  |         |                 |             |                                     |  |  |
| Station             |                                | -                |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         | <u> </u>        |             |                                     |  |  |
|                     |                                |                  |           |                                  | ļ       |                 |             |                                     |  |  |
|                     |                                | H                |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     | 0.00                           |                  |           | Total DSEs                       | 0.00    |                 |             | otal DSEs                           |  |  |
|                     | 0.00                           | \$               | d Group   | Gross Receipts Second            | 0.00    | \$              | roup        | Gross Receipts First Gr             |  |  |
|                     |                                |                  |           |                                  |         |                 | ·           | ·                                   |  |  |
|                     | 0.00                           | \$               | d Group   | Base Rate Fee Second             | 0.00    | \$              | roup        | ase Rate Fee First Gr               |  |  |
|                     | <b>D</b>                       | SUBSCRIBER GROUP | ETY-SIXTH | NINE                             | JP      | SUBSCRIBER GROU | ETY-FIFTH   | NINE                                |  |  |
|                     | 0                              |                  |           | COMMUNITY/ AREA                  | 0       |                 |             | COMMUNITY/ AREA                     |  |  |
|                     | DSE                            | CALL SIGN        | DSE       | CALL SIGN                        | DSE     | CALL SIGN       | DSE         | CALL SIGN                           |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 | <u></u>     |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 | ···         |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 | ••••        |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  | <b>.</b>  |                                  | <b></b> |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  | ļ         |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     |                                |                  |           |                                  |         |                 |             |                                     |  |  |
|                     | 0.00                           |                  |           | Total DSEs                       | 0.00    |                 |             | otal DSEs                           |  |  |
|                     | 0.00                           | \$               | Group     | Total DSEs Gross Receipts Fourth | 0.00    | \$              | Group       | otal DSEs<br>Gross Receipts Third G |  |  |

| LEGAL NAME OF OWNER Nortex Communica                |              |                 |             |                          |          | SY               | 5984     | Name             |
|---|--------------|-----------------|-------------|--------------------------|----------|------------------|----------|------------------|
| В   | LOCK A:      | COMPUTATION OF  | BASE RA     | TE FEES FOR EACH         | SUBSCRI  | BER GROUP        |          |                  |
|   |              | SUBSCRIBER GROU |             | TI .                     |          | SUBSCRIBER GROUP |          | _                |
| COMMUNITY/ AREA                                     |              |                 | 0           | COMMUNITY/ AREA          |          |                  | 0        | 9<br>Computation |
| CALL SIGN   | DSE          | CALL SIGN       | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE      | of               |
| O/ILE OIGIV   | DOL          | O/ILL OIOIV     | DOL         | O/ILL GIGIN              | DOL      | O/ILL GIGIT      | DOL      | Base Rate Fee    |
|   |              |                 |             |                          |          | H                |          | and              |
|   |              |                 |             |                          |          |                  |          | Syndicated       |
|   | <b></b>      |                 |             |                          |          |                  |          | Exclusivity      |
|   | <b></b>      |                 |             |                          |          | H                |          |                  |
|   |              |                 |             |                          |          |                  |          | Surcharge        |
|   | ļ            |                 |             |                          |          |                  |          | for              |
|   | <b></b>      |                 |             |                          |          | H                |          | Partially        |
|   |              |                 |             |                          |          |                  |          | Distant          |
|   | <b></b>      |                 |             |                          |          |                  |          | Stations         |
|   |              |                 |             |                          |          | <br>             |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |
|   |              |                 |             |                          |          |                  | <u> </u> |                  |
|   |              |                 | <u> </u>    |                          |          |                  |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |
| Total DSEs  | <u> </u>     |                 | 0.00        | Total DSEs               |          |                  | 0.00     |                  |
| Gross Receipts First Gro                            | oup          | \$              | 0.00        | Gross Receipts Second    | d Group  | \$               | 0.00     |                  |
|   |              |                 |             |                          |          |                  |          |                  |
| Base Rate Fee First Gro                             | oup          | \$              | 0.00        | Base Rate Fee Second     | d Group  | \$               | 0.00     |                  |
| NINET   | Y-NINTH      | SUBSCRIBER GROU | Р           | ONE HU                   | NDREDTH  | SUBSCRIBER GROUP |          |                  |
| COMMUNITY/ AREA                                     |              |                 | 0           | COMMUNITY/ AREA          |          |                  |          |                  |
| CALL SIGN   | DSE          | CALL SIGN       | DSE         | CALL SIGN                | DSE      | CALL SIGN        | DSE      |                  |
|   |              |                 |             |                          |          |                  |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |
|   |              |                 |             |                          |          | =                |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |
|   | <b>†</b>     |                 |             |                          |          |                  | ·        |                  |
|   |              |                 |             |                          |          |                  |          |                  |
|   | <del> </del> |                 | ļ           |                          | <b></b>  |                  | ·        |                  |
|   | ļ            |                 |             |                          |          |                  |          |                  |
|   | <b></b>      |                 |             |                          | <u></u>  |                  |          |                  |
|   | <b></b>      |                 | ļ           |                          | <b></b>  |                  | ·        |                  |
|   | ļ            |                 | ļ           |                          | <u> </u> |                  |          |                  |
|   | ļ            |                 | ļ           |                          | <u> </u> |                  |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |
| Total DSEs  |              | -               | 0.00        | Total DSEs               |          |                  | 0.00     |                  |
| Gross Receipts Third Gr                             | oup          | \$              | 0.00        | Gross Receipts Fourth    | Group    | \$               | 0.00     |                  |
| Base Rate Fee Third Gr                              | oup          | \$              | 0.00        | Base Rate Fee Fourth     | Group    | \$               | 0.00     |                  |
|   |              |                 |             | ••                       |          |                  |          |                  |
| Base Rate Fee: Add the<br>Enter here and in block 3 |              |                 | ber group a | as shown in the boxes ab | ove.     | \$               |          |                  |
|   |              |                 |             |                          |          |                  |          |                  |

| LEGAL NAME OF OWNER Nortex Communica              |          |                                   |             |                          |             | SY                            | STEM ID#<br>5984 | Name                |
|---|----------|-----------------------------------|-------------|--------------------------|-------------|-------------------------------|------------------|---------------------|
|   |          | COMPUTATION OF<br>SUBSCRIBER GROU |             | ONE HUNDRE               |             | BER GROUP<br>SUBSCRIBER GROUP | 0                | 9                   |
| COMMUNITY/ AREA                                   |          |                                   | U           | COMMUNITY/ AREA          |             |                               | U                | Computation         |
| CALL SIGN   | DSE      | CALL SIGN                         | DSE         | CALL SIGN                | DSE         | CALL SIGN                     | DSE              | of                  |
|   |          |                                   |             |                          |             |                               |                  | Base Rate Fee       |
|   |          |                                   |             |                          |             |                               |                  | and<br>Syndicated   |
|   |          |                                   |             |                          | <del></del> |                               |                  | Exclusivity         |
|   |          |                                   |             |                          |             |                               |                  | Surcharge           |
|   |          |                                   |             |                          |             |                               |                  | for                 |
|   |          |                                   |             |                          |             |                               |                  | Partially           |
|   | <u></u>  |                                   |             |                          |             | H                             |                  | Distant<br>Stations |
|   |          |                                   |             |                          |             |                               |                  |                     |
|   |          |                                   |             |                          |             |                               |                  |                     |
|   | ļ        |                                   |             |                          |             |                               |                  |                     |
|   | <b>_</b> |                                   |             |                          |             |                               |                  |                     |
|   | <b> </b> |                                   |             |                          |             |                               |                  |                     |
| Total DSEs  |          |                                   | 0.00        | Total DSEs               | •           | 11                            | 0.00             |                     |
|   |          |                                   |             |                          |             |                               | -                |                     |
| Gross Receipts First Gro                          | oup      | \$                                | 0.00        | Gross Receipts Secon     | d Group     | \$                            | 0.00             |                     |
| Base Rate Fee First Gro                           |          | \$                                | 0.00        | Base Rate Fee Secon      |             | \$                            | 0.00             |                     |
|   | ED THIRD | SUBSCRIBER GROU                   |             | ti e                     | D FOURTH    | SUBSCRIBER GROUP              |                  |                     |
| COMMUNITY/ AREA                                   |          |                                   | 0           | COMMUNITY/ AREA          | 0           |                               |                  |                     |
| CALL SIGN   | DSE      | CALL SIGN                         | DSE         | CALL SIGN                | DSE         | CALL SIGN                     | DSE              |                     |
|   |          |                                   |             |                          |             |                               |                  |                     |
|   | <u></u>  |                                   |             |                          |             |                               |                  |                     |
|   |          |                                   |             |                          |             |                               |                  |                     |
|   |          |                                   |             |                          |             |                               |                  |                     |
|   |          |                                   |             |                          |             |                               |                  |                     |
|   |          |                                   |             |                          |             |                               |                  |                     |
|   | <b></b>  |                                   |             |                          | <u></u>     |                               |                  |                     |
|   |          |                                   |             |                          |             |                               |                  |                     |
|   | <b>_</b> |                                   |             |                          |             |                               |                  |                     |
|   | <b> </b> |                                   |             |                          |             |                               |                  |                     |
|   | <b>_</b> |                                   |             |                          |             |                               |                  |                     |
|   |          |                                   |             |                          |             |                               |                  |                     |
| Total DSEs  |          |                                   | 0.00        | Total DSEs               | _           |                               | 0.00             |                     |
| Gross Receipts Third Gr                           | oup      | \$                                | 0.00        | Gross Receipts Fourth    | Group       | \$                            | 0.00             |                     |
| Base Rate Fee Third Group \$ 0.00                 |          |                                   | 0.00        | Base Rate Fee Fourth     | Group       | \$                            | 0.00             |                     |
|   |          |                                   |             | П                        |             |                               |                  |                     |
| Base Rate Fee: Add the<br>Enter here and in block |          |                                   | ber group a | as shown in the boxes ab | oove.       | \$                            |                  |                     |
| <u>i</u>  |          |                                   |             |                          |             | 1                             |                  |                     |

| LEGAL NAME OF OWNER Nortex Communica |              |                         |             |                           |          | SYS                | 5984 | Name             |
|--------------------------------------|--------------|-------------------------|-------------|---------------------------|----------|--------------------|------|------------------|
| В                                    | LOCK A:      | COMPUTATION OF          | BASE RA     | TE FEES FOR EACH          | SUBSCRI  | BER GROUP          |      |                  |
|                                      |              | SUBSCRIBER GROU         |             | (1)                       |          | SUBSCRIBER GROUP   |      |                  |
| COMMUNITY/ AREA                      |              |                         | 0           | COMMUNITY/ AREA           |          |                    | 0    | 9<br>Computation |
| CALL SIGN                            | DSE          | CALL SIGN               | DSE         | CALL SIGN                 | DSE      | CALL SIGN          | DSE  | of               |
| CALL CICIY                           | DOL          | O/ LEE GIGIT            | DOL         | O/ ILL SIGIN              | BOL      | CALL GIGIT         | BGE  | Base Rate Fee    |
|                                      |              |                         |             |                           |          |                    |      | and              |
|                                      |              |                         |             |                           |          | _                  |      | Syndicated       |
|                                      |              |                         |             |                           |          |                    |      | Exclusivity      |
|                                      |              |                         |             | -                         |          |                    |      | Surcharge        |
|                                      | <del> </del> |                         |             |                           |          |                    |      | for              |
|                                      | ł            |                         |             |                           |          |                    |      | Partially        |
|                                      | ł            |                         |             |                           |          |                    |      | Distant          |
|                                      |              |                         |             |                           |          |                    |      | Stations         |
|                                      | ł            |                         |             |                           |          |                    |      | Stations         |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      | <del> </del> |                         |             |                           | <b></b>  |                    |      |                  |
|                                      | ł            |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           | <u> </u> |                    |      |                  |
| Total DSEs                           |              |                         | 0.00        | Total DSEs                |          |                    | 0.00 |                  |
| Gross Receipts First Gro             | oup          | \$                      | 0.00        | Gross Receipts Second     | d Group  | \$                 | 0.00 |                  |
| Base Rate Fee First Gro              | oup          | \$                      | 0.00        | Base Rate Fee Second      | d Group  | \$                 | 0.00 |                  |
| ONE LIUNDBED C                       | `C\/CNTLL    | CURCODIRED CROU         | D.          | ONE LIUNDRE               | D EIGHTH | CLIBCODIDED CDOLID |      |                  |
| COMMUNITY/ AREA                      | DEVENTH      | SUBSCRIBER GROU         | 0           | COMMUNITY/ AREA           | DEIGHTH  | SUBSCRIBER GROUP   | 0    |                  |
| CALL SIGN                            | DSE          | CALL SIGN               | DSE         | CALL SIGN                 | DSE      | CALL SIGN          | DSE  |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           |          | =                  |      |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      | <b>†</b>     |                         |             |                           |          |                    |      |                  |
|                                      | <b>†</b>     |                         |             |                           |          |                    |      |                  |
|                                      | <b>†</b>     |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
|                                      | <b>†</b>     |                         |             |                           |          |                    |      |                  |
|                                      | <b>†</b>     |                         |             |                           |          |                    |      |                  |
|                                      | <b>†</b>     |                         |             |                           |          |                    |      |                  |
|                                      |              |                         |             |                           |          |                    |      |                  |
| Total DSEs                           |              |                         | 0.00        | Total DSEs                | •        |                    | 0.00 |                  |
| Gross Receipts Third Gr              | oup          | \$                      | 0.00        | Gross Receipts Fourth     | Group    | \$                 | 0.00 |                  |
| ·                                    | ·            |                         |             |                           | ·        |                    |      |                  |
| Base Rate Fee Third Group \$ 0.00    |              | Base Rate Fee Fourth    | Group       | \$                        | 0.00     |                    |      |                  |
| Base Rate Fee: Add the               | base rate    | e fees for each subscri | ber group a | as shown in the boxes abo | ove.     |                    |      |                  |
| Enter here and in block 3            |              |                         |             |                           |          | \$                 |      |                  |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |              |                 |              |                                |          |                  |          | Name             |
|---|--------------|-----------------|--------------|--------------------------------|----------|------------------|----------|------------------|
| E   | BLOCK A:     | COMPUTATION OF  | BASE RA      | ATE FEES FOR EACH              | SUBSCRI  | BER GROUP        |          |                  |
|   | ED NINTH     | SUBSCRIBER GROU |              | Ħ                              | ED TENTH | SUBSCRIBER GROUP |          | 9                |
| COMMUNITY/ AREA   |              |                 | 0            | COMMUNITY/ AREA                |          |                  | 0        | Computation      |
| CALL SIGN   | DSE          | CALL SIGN       | DSE          | CALL SIGN                      | DSE      | CALL SIGN        | DSE      | of               |
|   |              |                 |              |                                |          |                  |          | Base Rate Fee    |
|   |              |                 |              |                                |          |                  |          | and              |
|   |              |                 |              |                                |          | -                |          | Syndicated       |
|   |              |                 |              |                                |          |                  |          | Exclusivity      |
|   | <u></u>      |                 |              |                                |          |                  |          | Surcharge<br>for |
|   | <del> </del> |                 |              |                                |          |                  | ··       | Partially        |
|   |              |                 |              |                                |          | -                | ·        | Distant          |
|   |              |                 |              |                                |          |                  |          | Stations         |
|   |              |                 |              |                                |          |                  |          |                  |
|   |              |                 |              |                                |          |                  |          |                  |
|   |              |                 | ļ            |                                |          |                  |          |                  |
|   | <u></u>      |                 |              |                                |          |                  |          |                  |
|   |              |                 |              |                                |          |                  | <u>-</u> |                  |
| Total DSEs  |              | Ч               | 0.00         | Total DSEs                     | 4        |                  | 0.00     |                  |
|   |              |                 |              |                                |          |                  |          |                  |
| Gross Receipts First Gr   | oup          | \$              | 0.00         | Gross Receipts Second          | d Group  | \$               | 0.00     |                  |
| Base Rate Fee First Gr  | oup          | \$              | 0.00         | Base Rate Fee Second           | d Group  | \$               | 0.00     |                  |
| ONE HUNDRED E   | LEVENTH      | SUBSCRIBER GROU | IP           | ONE HUNDRED                    | TWELVTH  | SUBSCRIBER GROUP | •        |                  |
| COMMUNITY/ AREA   |              |                 | 0            | COMMUNITY/ AREA                |          |                  | 0        |                  |
| CALL SIGN   | DSE          | CALL SIGN       | DSE          | CALL SIGN                      | DSE      | CALL SIGN        | DSE      |                  |
|   |              |                 |              |                                |          |                  |          |                  |
|   |              |                 |              |                                |          |                  |          |                  |
|   | <del></del>  |                 |              |                                |          |                  | ··       |                  |
|   | <u> </u>     |                 |              |                                |          |                  | ·        |                  |
|   |              |                 |              |                                |          |                  |          |                  |
|   |              |                 |              |                                |          |                  |          |                  |
|   | <u></u>      |                 |              |                                | <u></u>  |                  |          |                  |
|   |              |                 |              |                                | <b></b>  |                  |          |                  |
|   | <u></u>      |                 |              | -                              | <b> </b> |                  | ··       |                  |
|   | <u>-</u>     |                 |              |                                | <b>-</b> | H                | ·        |                  |
|   |              |                 |              |                                |          |                  |          |                  |
|   |              |                 |              |                                |          |                  |          |                  |
|   |              |                 |              |                                |          |                  |          |                  |
| Total DSEs  |              |                 | 0.00         | Total DSEs                     |          |                  | 0.00     |                  |
| Gross Receipts Third G  | roup         | \$              | 0.00         | Gross Receipts Fourth          | Group    | \$               | 0.00     |                  |
| Base Rate Fee Third G   | roup         | \$              | 0.00         | Base Rate Fee Fourth           | Group    | \$               | 0.00     |                  |
| Base Rate Fee: Add the Enter here and in block                                    |              |                 | iber group a | II<br>as shown in the boxes ab | ove.     | \$               |          |                  |

| LEGAL NAME OF OWNER Nortex Communica                |        |                 |                                     |                          |                | S                             | YSTEM ID#<br>5984 | Name                 |
|---|--------|-----------------|-------------------------------------|--------------------------|----------------|-------------------------------|-------------------|----------------------|
| B ONE HUNDRED THIS COMMUNITY/ AREA                  |        |                 |                                     | ONE HUNDRED FOL          |                | BER GROUP<br>SUBSCRIBER GROUP | 0                 | 9                    |
|   |        |                 |                                     | Sommorth 1, 7 a text     |                |                               |                   | Computation          |
| CALL SIGN   | DSE    | CALL SIGN       | DSE                                 | CALL SIGN                | DSE            | CALL SIGN                     | DSE               | of                   |
|   |        |                 |                                     |                          |                |                               |                   | Base Rate Fee and    |
|   |        |                 |                                     |                          |                |                               |                   | Syndicated           |
|   |        |                 |                                     |                          |                |                               |                   | Exclusivity          |
|   |        |                 |                                     |                          |                |                               |                   | Surcharge            |
|   |        |                 |                                     |                          |                |                               |                   | for                  |
|   |        |                 |                                     |                          |                |                               |                   | Partially<br>Distant |
|   |        |                 |                                     |                          |                |                               |                   | Stations             |
|   |        |                 |                                     |                          |                |                               |                   |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
|   |        |                 |                                     |                          | <b></b>        |                               |                   |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
| Total DSEs  |        |                 | 0.00                                | Total DSEs               |                |                               | 0.00              |                      |
| Gross Receipts First Group \$ 0.00                  |        | 0.00            | Gross Receipts Second Group \$ 0.00 |                          |                |                               |                   |                      |
| ·   | •      |                 |                                     |                          | ·              | ·                             |                   |                      |
| Base Rate Fee First Gro                             | oup    | \$              | 0.00                                | Base Rate Fee Secon      | d Group        | \$                            | 0.00              |                      |
| ONE HUNDRED FIR                                     | TEENTH | SUBSCRIBER GROU |                                     | ii e                     | SIXTEENTH      | SUBSCRIBER GROUP              | <b>D</b>          |                      |
| COMMUNITY/ AREA                                     |        |                 | 0                                   | COMMUNITY/ AREA          |                |                               | 0                 |                      |
| CALL SIGN   | DSE    | CALL SIGN       | DSE                                 | CALL SIGN                | DSE            | CALL SIGN                     | DSE               |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
|   |        |                 |                                     |                          | <del></del>    | -                             |                   |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
|   |        |                 |                                     |                          |                | -                             |                   |                      |
|   |        |                 |                                     |                          | <del>.  </del> |                               |                   |                      |
|   |        |                 |                                     |                          |                |                               | <u></u>           |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
|   | ļ      |                 |                                     |                          |                |                               |                   |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
|   |        |                 |                                     |                          |                |                               |                   |                      |
| Total DSEs  |        |                 | 0.00                                | Total DSEs               |                |                               | 0.00              |                      |
| Gross Receipts Third Gr                             | oup    | \$              | 0.00                                | Gross Receipts Fourth    | Group          | \$                            | 0.00              |                      |
| Base Rate Fee Third Gr                              | oup    | \$              | 0.00                                | Base Rate Fee Fourth     | ı Group        | \$                            | 0.00              |                      |
|   |        |                 |                                     | II .                     |                |                               |                   |                      |
| Base Rate Fee: Add the<br>Enter here and in block 3 |        |                 | ber group a                         | as shown in the boxes ab | oove.          | \$                            |                   |                      |

| LEGAL NAME OF OWNER Nortex Communica              |          |                 |                      |                          |             | SY                            | STEM ID#<br>5984 | Name                 |
|---|----------|-----------------|----------------------|--------------------------|-------------|-------------------------------|------------------|----------------------|
| B ONE HUNDRED SEVEN COMMUNITY/ AREA               |          |                 |                      | ONE HUNDRED EIG          |             | BER GROUP<br>SUBSCRIBER GROUP | 0                | 9                    |
|   |          | II              |                      |                          |             | II                            |                  | Computation          |
| CALL SIGN   | DSE      | CALL SIGN       | DSE                  | CALL SIGN                | DSE         | CALL SIGN                     | DSE              | of<br>Base Rate Fee  |
|   |          |                 |                      |                          | <del></del> |                               |                  | and                  |
|   | <b>†</b> |                 |                      |                          |             |                               |                  | Syndicated           |
|   |          |                 |                      |                          |             |                               |                  | Exclusivity          |
|   | ļ        |                 |                      |                          |             |                               |                  | Surcharge            |
|   | <b>_</b> |                 |                      |                          |             |                               |                  | for                  |
|   | <b> </b> |                 |                      |                          | <u></u>     |                               | <u> </u>         | Partially<br>Distant |
|   | <b></b>  |                 |                      |                          |             |                               |                  | Stations             |
|   | <b>†</b> |                 |                      |                          |             |                               |                  |                      |
|   |          |                 |                      |                          |             |                               |                  |                      |
|   | ļ        |                 |                      |                          |             |                               |                  |                      |
|   |          |                 |                      |                          |             |                               |                  |                      |
|   |          |                 |                      |                          | <u> </u>    |                               |                  |                      |
|   |          |                 |                      |                          |             | Ш                             |                  |                      |
| Total DSEs  |          |                 | 0.00                 | Total DSEs               |             |                               | 0.00             |                      |
| Gross Receipts First Group \$ 0.00                |          | 0.00            | Gross Receipts Secon | d Group                  | \$          | 0.00                          |                  |                      |
| Base Rate Fee First Gro                           | oup      | \$              | 0.00                 | Base Rate Fee Secon      | d Group     | \$                            | 0.00             |                      |
| ONE HUNDRED NIN                                   | NTEENTH  | SUBSCRIBER GROU | P                    | ONE HUNDRED T            | WENTIETH    | SUBSCRIBER GROUP              |                  |                      |
| COMMUNITY/ AREA                                   |          |                 | 0                    | COMMUNITY/ AREA          |             |                               | 0                |                      |
| CALL SIGN   | DSE      | CALL SIGN       | DSE                  | CALL SIGN                | DSE         | CALL SIGN                     | DSE              |                      |
|   |          |                 |                      |                          |             |                               |                  |                      |
|   | <b> </b> |                 |                      |                          |             |                               |                  |                      |
|   |          |                 |                      |                          |             |                               |                  |                      |
|   | <u> </u> |                 |                      |                          |             |                               |                  |                      |
|   |          |                 |                      |                          |             |                               |                  |                      |
|   | <b>.</b> |                 |                      |                          |             |                               |                  |                      |
|   | <b>_</b> |                 |                      |                          | <u></u>     |                               |                  |                      |
|   | <b>_</b> |                 |                      |                          |             |                               |                  |                      |
|   | <u> </u> |                 |                      |                          |             |                               |                  |                      |
|   |          |                 |                      |                          |             |                               |                  |                      |
|   | ļ        |                 |                      |                          |             |                               |                  |                      |
|   | <b>_</b> |                 |                      |                          |             |                               |                  |                      |
|   |          |                 |                      |                          |             |                               |                  |                      |
| Total DSEs  |          |                 | 0.00                 | Total DSEs               |             |                               | 0.00             |                      |
| Gross Receipts Third Gr                           | oup      | \$              | 0.00                 | Gross Receipts Fourth    | Group       | \$                            | 0.00             |                      |
| Base Rate Fee Third Gr                            | oup      | \$              | 0.00                 | Base Rate Fee Fourth     | Group       | \$                            | 0.00             |                      |
|   |          |                 |                      | П                        |             |                               |                  |                      |
| Base Rate Fee: Add the<br>Enter here and in block |          |                 | ber group a          | as shown in the boxes ab | oove.       | \$                            |                  |                      |
|   |          |                 |                      |                          |             |                               |                  |                      |

| LEGAL NAME OF OWNER Nortex Communica                |           |                                   |             |                          |           | S                | YSTEM ID#<br>5984 | Name              |
|---|-----------|-----------------------------------|-------------|--------------------------|-----------|------------------|-------------------|-------------------|
| ONE HUNDRED TWEN                                    |           | COMPUTATION OF<br>SUBSCRIBER GROU | Р           | ATE FEES FOR EACH        |           |                  |                   | 9                 |
| COMMUNITY/ AREA                                     |           |                                   | 0           | COMMUNITY/ AREA          |           |                  | 0                 | Computation       |
| CALL SIGN   | DSE       | CALL SIGN                         | DSE         | CALL SIGN                | DSE       | CALL SIGN        | DSE               | of                |
|   |           |                                   |             |                          |           |                  |                   | Base Rate Fee     |
|   |           |                                   |             |                          |           |                  |                   | and<br>Syndicated |
|   |           |                                   |             |                          | ···       |                  | ···               | Exclusivity       |
|   |           |                                   |             |                          |           |                  |                   | Surcharge         |
|   |           |                                   |             |                          |           |                  |                   | for<br>Partially  |
|   |           |                                   |             |                          |           |                  |                   | Distant           |
|   |           |                                   |             |                          |           |                  |                   | Stations          |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
| Total DSEs  |           |                                   | 0.00        | Total DSEs               |           |                  | 0.00              |                   |
| Gross Receipts First Gro                            | oup       | \$                                | 0.00        | Gross Receipts Secon     | d Group   | \$               | 0.00              |                   |
| Base Rate Fee First Gro                             | oup       | \$                                | 0.00        | Base Rate Fee Secon      | d Group   | \$               | 0.00              |                   |
| ONE HUNDRED TWEN                                    | TY-THIRD  | SUBSCRIBER GROUP                  |             | ONE HUNDRED TWEN         | TY-FOURTH | SUBSCRIBER GROUP |                   |                   |
| COMMUNITY/ AREA                                     |           |                                   | 0           | COMMUNITY/ AREA          |           |                  | 0                 |                   |
| CALL SIGN   | DSE       | CALL SIGN                         | DSE         | CALL SIGN                | DSE       | CALL SIGN        | DSE               |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          | •         |                  | ···               |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  |                   |                   |
|   |           |                                   |             |                          |           |                  | <u></u>           |                   |
| Total DSEs  | 1         |                                   | 0.00        | Total DSEs               |           |                  | 0.00              |                   |
| Gross Receipts Third Gr                             | oup       | \$                                | 0.00        | Gross Receipts Fourth    | Group     | \$               | 0.00              |                   |
| Base Rate Fee Third Gr                              | oup       | \$                                | 0.00        | Base Rate Fee Fourth     | Group     | \$               | 0.00              |                   |
| Page Pate Foc. Add 44-                              | hace ==== | foot for each subs                | hor grows   | ne chown in the haves    | 2010      |                  |                   |                   |
| Base Rate Fee: Add the<br>Enter here and in block ( |           |                                   | pei gioup i | ao onown in the boxes at | , v v c . | \$               |                   |                   |

| LEGAL NAME OF OWNER Nortex Communica |                                    |                                 |             |                                     |            | S                          | YSTEM ID#<br>5984 | Name              |
|--------------------------------------|------------------------------------|---------------------------------|-------------|-------------------------------------|------------|----------------------------|-------------------|-------------------|
|                                      |                                    | COMPUTATION OF SUBSCRIBER GROUP | BASE RA     | ONE HUNDRED TWE                     |            | BER GROUP SUBSCRIBER GROUP | 0                 | 9                 |
|                                      |                                    |                                 |             |                                     |            |                            |                   | Computation       |
| CALL SIGN                            | DSE                                | CALL SIGN                       | DSE         | CALL SIGN                           | DSE        | CALL SIGN                  | DSE               | of                |
|                                      |                                    |                                 |             |                                     |            |                            |                   | Base Rate Fee and |
|                                      |                                    |                                 |             |                                     |            |                            |                   | Syndicated        |
|                                      |                                    |                                 |             |                                     | <u> </u>   |                            | ···               | Exclusivity       |
|                                      |                                    |                                 |             |                                     |            |                            |                   | Surcharge         |
|                                      |                                    |                                 |             |                                     |            |                            |                   | for               |
|                                      |                                    |                                 |             |                                     |            | _                          |                   | Partially         |
|                                      |                                    |                                 |             |                                     |            |                            |                   | Distant           |
|                                      | <u> </u>                           |                                 |             | -                                   |            |                            |                   | Stations          |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      | <b></b>                            |                                 |             |                                     | -          |                            | ···               |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
| Total DSEs                           |                                    |                                 | 0.00        | Total DSEs                          |            |                            | 0.00              |                   |
| Gross Receipts First Gro             | Gross Receipts First Group \$ 0.00 |                                 | 0.00        | Gross Receipts Second Group \$ 0.00 |            |                            |                   |                   |
| ,                                    | •                                  |                                 |             |                                     |            | -                          |                   |                   |
| Base Rate Fee First Gro              | oup                                | \$                              | 0.00        | Base Rate Fee Second                | d Group    | \$                         | 0.00              |                   |
| ONE HUNDRED TWENTY-                  | -SEVENTH                           | SUBSCRIBER GROUP                |             | ONE HUNDRED TWEN                    | ITY-EIGHTH | SUBSCRIBER GROUP           |                   |                   |
| COMMUNITY/ AREA                      |                                    |                                 | 0           | COMMUNITY/ AREA                     |            |                            | 0                 |                   |
| CALL SIGN                            | DSE                                | CALL SIGN                       | DSE         | CALL SIGN                           | DSE        | CALL SIGN                  | DSE               |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      |                                    |                                 |             |                                     | <u> </u>   |                            | ···               |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
|                                      | <u> </u>                           |                                 |             | -                                   | <u> </u>   |                            |                   |                   |
|                                      | ļ                                  |                                 |             |                                     |            |                            | ···               |                   |
|                                      | <b>-</b>                           |                                 |             |                                     | <u> </u>   |                            |                   |                   |
|                                      |                                    |                                 |             |                                     |            |                            |                   |                   |
| Total DSEs                           |                                    |                                 | 0.00        | Total DSEs                          |            |                            | 0.00              |                   |
| Gross Receipts Third Gr              | oup                                | \$                              | 0.00        | Gross Receipts Fourth               | Group      | \$                         | 0.00              |                   |
| Base Rate Fee Third Gr               | oup                                | \$                              | 0.00        | Base Rate Fee Fourth                | Group      | \$                         | 0.00              |                   |
| Base Rate Fee: Add the               |                                    |                                 | ber group a | as shown in the boxes ab            | ove.       |                            |                   |                   |
| Enter here and in block              | 3, line 1, sp                      | pace L (page 7)                 |             |                                     |            | \$                         |                   |                   |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |             |                  |                                     |                       |                  |                  |          | Name                     |
|---|-------------|------------------|-------------------------------------|-----------------------|------------------|------------------|----------|--------------------------|
|   | BLOCK A:    | COMPUTATION C    | F BASE RA                           | TE FEES FOR EAC       | CH SUBSCR        | BER GROUP        |          |                          |
| ONE HUNDRED TV  | WENTY-NINTH | SUBSCRIBER GROUP | 0                                   | ONE HUNDR             | ED THIRTIETH     | SUBSCRIBER GROUP |          | 0                        |
| COMMUNITY/ AREA   | Α           |                  | 0                                   | COMMUNITY/ ARE        | 9<br>Computation |                  |          |                          |
| CALL SIGN   | DSE         | CALL SIGN        | DSE                                 | CALL SIGN             | DSE              | CALL SIGN        | DSE      | of                       |
|   |             |                  |                                     |                       |                  |                  |          | Base Rate Fee            |
|   |             |                  |                                     |                       |                  |                  |          | and                      |
|   |             | -                |                                     |                       |                  |                  |          | Syndicated               |
|   |             | H                |                                     |                       |                  | -                |          | Exclusivity<br>Surcharge |
|   |             | <u> </u>         |                                     |                       |                  | ·                |          | for                      |
|   |             |                  |                                     |                       |                  |                  |          | Partially                |
|   |             |                  |                                     |                       |                  |                  |          | Distant                  |
|   |             |                  |                                     |                       |                  |                  |          | Stations                 |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
| Total DSEs  |             |                  | 0.00                                | Total DSEs            |                  |                  | 0.00     |                          |
| Gross Receipts First Group \$ 0.00  |             | 0.00             | Gross Receipts Second Group \$ 0.00 |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
| Base Rate Fee First   | •           | \$               | 0.00                                | Base Rate Fee Sec     |                  | \$               | 0.00     |                          |
|   |             | SUBSCRIBER GROUP |                                     |                       |                  | SUBSCRIBER GROUP | _        |                          |
| COMMUNITY/ AREA   | 4           |                  | 0                                   | COMMUNITY/ ARE        | Α                |                  | 0        |                          |
| CALL SIGN   | DSE         | CALL SIGN        | DSE                                 | CALL SIGN             | DSE              | CALL SIGN        | DSE      |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  | ••••                                |                       |                  | -                |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  | -                |          |                          |
|   |             | <b> </b>         |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
|   |             |                  |                                     |                       |                  |                  |          |                          |
| Total DSEs  |             |                  | 0.00                                | Total DSEs            |                  |                  | 0.00     |                          |
| Gross Receipts Thire  | d Group     | \$               | 0.00                                | Gross Receipts Fou    | rth Group        | \$               | 0.00     |                          |
|   |             |                  |                                     |                       |                  |                  | <u>_</u> |                          |
| Base Rate Fee Third   | d Group     | \$               | 0.00                                | Base Rate Fee Fou     | rth Group        | \$               | 0.00     |                          |
|   |             |                  |                                     | ш                     |                  |                  |          |                          |
| Base Rate Fee: Add<br>Enter here and in blo                                       |             |                  | criber group a                      | as shown in the boxes | above.           | \$               |          |                          |
|   | ,           | (130 . /         |                                     |                       |                  | •                |          |                          |

| LEGAL NAME OF OWNER Nortex Communica             |              |                  |             |                           |           | SY               | STEM ID#<br>5984 | Name             |
|--|--------------|------------------|-------------|---------------------------|-----------|------------------|------------------|------------------|
| В  | LOCK A:      | COMPUTATION OF   | BASE RA     | TE FEES FOR EACH          | SUBSCRI   | BER GROUP        |                  |                  |
|  |              | SUBSCRIBER GROUP |             | III                       |           | SUBSCRIBER GROUP |                  |                  |
| COMMUNITY/ AREA                                  |              |                  | 0           | COMMUNITY/ AREA           |           |                  | 0                | 9<br>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         |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           | -                |                  |                  |
|  | <b></b>      |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  | <u> </u>     |                  |             |                           |           |                  |                  |                  |
| Total DSEs                                       |              |                  | 0.00        | Total DSEs                |           |                  | 0.00             |                  |
| Gross Receipts First Gro                         | oup          | \$               | 0.00        | Gross Receipts Second     | d Group   | \$               | 0.00             |                  |
| Base Rate Fee First Gro                          | oup          | \$               | 0.00        | Base Rate Fee Second      | d Group   | \$               | 0.00             |                  |
| ONE HUNDRED THIF                                 | RTY-FIFTH    | SUBSCRIBER GROUP |             | ONE HUNDRED THI           | RTY-SIXTH | SUBSCRIBER GROUP |                  |                  |
| COMMUNITY/ AREA                                  |              |                  | 0           | COMMUNITY/ AREA           |           |                  | 0                |                  |
| CALL SIGN  | DSE          | CALL SIGN        | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE              |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           | -                |                  |                  |
|  |              |                  |             |                           |           | -                |                  |                  |
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|  | †·····       |                  |             |                           | <b></b>   |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
| Total DSEs                                       |              |                  | 0.00        | Total DSEs                | •         |                  | 0.00             |                  |
| Gross Receipts Third Gr                          | oup          | \$               | 0.00        | Gross Receipts Fourth     | Group     | \$               | 0.00             |                  |
| Base Rate Fee Third Gr                           | oup          | \$               | 0.00        | Base Rate Fee Fourth      | Group     | \$               | 0.00             |                  |
|  |              |                  |             | <u>II</u>                 |           |                  |                  |                  |
| Base Rate Fee: Add the Enter here and in block 3 |              |                  | ber group a | as shown in the boxes abo | ove.      | \$               |                  |                  |
|  |              |                  |             |                           |           | •                |                  |                  |

| LEGAL NAME OF OWNER Nortex Communica                |              |                  |             |                           |          | SY               | 5984 | Name             |
|---|--------------|------------------|-------------|---------------------------|----------|------------------|------|------------------|
| В   | LOCK A:      | COMPUTATION OF   | BASE RA     | TE FEES FOR EACH          | SUBSCRI  | BER GROUP        |      |                  |
| ONE HUNDRED THIRTY-                                 |              |                  |             |                           |          | SUBSCRIBER GROUP |      | _                |
| COMMUNITY/ AREA                                     |              |                  | 0           | COMMUNITY/ AREA           |          |                  | 0    | 9<br>Computation |
| CALL SIGN   | DSE          | CALL SIGN        | DSE         | CALL SIGN                 | DSE      | CALL SIGN        | DSE  | of               |
| CALL CICIA  | DOL          | O/ LE OIOIV      | DOL         | O/ILL OIGIN               | DOL      | O/ILL GIGIT      | DOL  | Base Rate Fee    |
|   |              |                  |             |                           |          |                  |      | and              |
|   |              |                  |             |                           |          |                  |      | Syndicated       |
|   |              |                  |             |                           |          |                  |      | Exclusivity      |
|   | ł            |                  |             |                           |          | H                |      |                  |
|   |              |                  |             |                           |          |                  |      | Surcharge        |
|   |              |                  |             |                           |          |                  |      | for              |
|   | ļ            |                  |             |                           |          | H                |      | Partially        |
|   | <b></b>      |                  |             |                           |          |                  |      | Distant          |
|   |              |                  |             |                           |          |                  |      | Stations         |
|   |              |                  |             |                           |          | <br>             |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
| Total DSEs  | -            |                  | 0.00        | Total DSEs                |          |                  | 0.00 |                  |
| Gross Receipts First Gro                            | oup          | \$               | 0.00        | Gross Receipts Second     | d Group  | \$               | 0.00 |                  |
|   |              |                  |             |                           |          |                  | 1    |                  |
| Base Rate Fee First Gro                             | oup          | \$               | 0.00        | Base Rate Fee Second      | d Group  | \$               | 0.00 |                  |
| ONE HUNDRED THIR                                    | TY-NINTH     | SUBSCRIBER GROUP |             | ONE HUNDRED I             | FORTIETH | SUBSCRIBER GROUP |      |                  |
| COMMUNITY/ AREA                                     |              |                  | 0           | COMMUNITY/ AREA           |          |                  | 0    |                  |
| CALL SIGN   | DSE          | CALL SIGN        | DSE         | CALL SIGN                 | DSE      | CALL SIGN        | DSE  |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          | =                |      |                  |
|   |              |                  |             |                           |          | H                |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
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|   | ļ            |                  |             |                           | ļ        |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |
| Total DSEs  |              |                  | 0.00        | Total DSEs                |          |                  | 0.00 |                  |
| Gross Receipts Third Gr                             | oup          | \$               | 0.00        | Gross Receipts Fourth     | Group    | \$               | 0.00 |                  |
| Base Rate Fee Third Gr                              | oup          | \$               | 0.00        | Base Rate Fee Fourth      | Group    | \$               | 0.00 |                  |
|   |              |                  |             | •                         |          |                  |      |                  |
| Base Rate Fee: Add the<br>Enter here and in block 3 |              |                  | ber group a | as shown in the boxes abo | ove.     | \$               |      |                  |
|   |              |                  |             |                           |          |                  |      |                  |

| LEGAL NAME OF OWNER Nortex Communica             |              |                   |             |                              |          | SY               | 5984 | Name             |
|--|--------------|-------------------|-------------|------------------------------|----------|------------------|------|------------------|
| BI   | LOCK A:      | COMPUTATION OF    | BASE RA     | TE FEES FOR EACH             | SUBSCRI  | BER GROUP        |      |                  |
| ONE HUNDRED FOR                                  | RTY-FIRST    | SUBSCRIBER GROUP  |             | ONE HUNDRED FORT             | Y-SECOND | SUBSCRIBER GROUP |      |                  |
| COMMUNITY/ AREA                                  |              |                   | 0           | COMMUNITY/ AREA              |          |                  | 0    | 9<br>Computation |
| CALL SIGN  | DSE          | CALL SIGN         | DSE         | CALL SIGN                    | DSE      | CALL SIGN        | DSE  | of               |
|  |              |                   |             |                              |          |                  |      | Base Rate Fee    |
|  |              |                   |             |                              |          |                  |      | and              |
|  |              |                   |             |                              |          |                  |      | Syndicated       |
|  |              |                   |             |                              |          |                  |      | Exclusivity      |
|  |              |                   |             |                              |          |                  |      | Surcharge        |
|  |              |                   |             |                              |          |                  |      | for              |
|  |              |                   |             |                              |          |                  |      | Partially        |
|  |              |                   |             |                              |          |                  |      | Distant          |
|  |              |                   |             |                              |          | _                |      | Stations         |
|  |              |                   |             |                              |          |                  |      |                  |
|  |              |                   |             |                              |          |                  |      |                  |
|  |              |                   |             |                              |          |                  |      |                  |
|  |              |                   |             |                              |          |                  |      |                  |
|  |              |                   |             |                              |          |                  |      |                  |
|  | <u> </u>     |                   |             |                              |          |                  |      |                  |
| Total DSEs                                       |              |                   | 0.00        | Total DSEs                   |          |                  | 0.00 |                  |
| Gross Receipts First Gro                         | oup          | \$                | 0.00        | Gross Receipts Second        | d Group  | \$               | 0.00 |                  |
| Base Rate Fee First Gro                          | oup          | \$                | 0.00        | Base Rate Fee Second         | d Group  | \$               | 0.00 |                  |
| ONE HUNDRED FOR                                  | TY-THIRD     | SUBSCRIBER GROUP  |             | ONE HUNDRED FORT             | Y-FOURTH | SUBSCRIBER GROUP |      |                  |
| COMMUNITY/ AREA                                  |              |                   | 0           | COMMUNITY/ AREA              |          |                  | 0    |                  |
| CALL SIGN  | DSE          | CALL SIGN         | DSE         | CALL SIGN                    | DSE      | CALL SIGN        | DSE  |                  |
|  |              |                   |             |                              |          |                  |      |                  |
|  |              |                   |             |                              |          |                  |      |                  |
|  |              |                   |             |                              |          |                  |      |                  |
|  |              |                   |             |                              |          |                  |      |                  |
|  |              |                   |             |                              |          |                  |      |                  |
|  |              |                   |             |                              |          |                  |      |                  |
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|  | <b>†</b>     |                   |             |                              | <b> </b> |                  | [    |                  |
|  |              |                   |             |                              |          |                  |      |                  |
| Total DSEs                                       |              |                   | 0.00        | Total DSEs                   |          |                  | 0.00 |                  |
| Gross Receipts Third Gr                          | oup          | \$                | 0.00        | Gross Receipts Fourth        | Group    | \$               | 0.00 |                  |
| Base Rate Fee Third Gr                           | oup          | \$                | 0.00        | Base Rate Fee Fourth         | Group    | \$               | 0.00 |                  |
| Page Pate Face Add #5                            | hane ret-    | food for each sub | hor grave - | on about in the haves        | 010      |                  |      |                  |
| Base Rate Fee: Add the Enter here and in block 3 |              |                   | oei gioup a | as siluwii iii iile duxes ad | ove.     | \$               |      |                  |

| LEGAL NAME OF OWNER Nortex Communica             |              |                  |             |                           |           | SY               | STEM ID#<br>5984 | Name             |
|--|--------------|------------------|-------------|---------------------------|-----------|------------------|------------------|------------------|
| В  | LOCK A:      | COMPUTATION OF   | BASE RA     | TE FEES FOR EACH          | SUBSCRI   | BER GROUP        |                  |                  |
|  |              | SUBSCRIBER GROUP |             | III                       |           | SUBSCRIBER GROUP |                  |                  |
| COMMUNITY/ AREA                                  |              |                  | 0           | COMMUNITY/ AREA           |           |                  | 0                | 9<br>Computation |
| CALL SIGN  | DSE          | CALL SIGN        | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE              | of               |
|  |              |                  |             |                           |           |                  |                  | Base Rate Fee    |
|  |              |                  |             |                           |           |                  |                  | and              |
|  |              |                  |             |                           |           |                  |                  | Syndicated       |
|  |              |                  |             |                           |           |                  |                  | Exclusivity      |
|  |              |                  |             |                           |           |                  |                  | Surcharge        |
|  |              |                  |             |                           |           |                  |                  | for              |
|  |              |                  |             |                           |           |                  |                  | Partially        |
|  |              |                  |             |                           |           |                  |                  | Distant          |
|  |              |                  |             |                           |           |                  |                  | Stations         |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  | <u> </u>         |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
| Total DCCs                                       |              |                  | 0.00        | Total DSEs                |           |                  | 0.00             |                  |
| Total DSEs                                       |              | •                | 0.00        |                           | Craun     | •                | 0.00             |                  |
| Gross Receipts First Gro                         | oup          | <u>\$</u>        | 0.00        | Gross Receipts Second     | Gloup     | \$               | 0.00             |                  |
| Base Rate Fee First Gro                          | oup          | \$               | 0.00        | Base Rate Fee Second      | d Group   | \$               | 0.00             |                  |
| ONE HUNDRED FORTY-                               | SEVENTH      | SUBSCRIBER GROUP |             | ONE HUNDRED FOR           | TY-EIGHTH | SUBSCRIBER GROUP |                  |                  |
| COMMUNITY/ AREA                                  |              |                  | 0           | COMMUNITY/ AREA           |           |                  | 0                |                  |
| CALL SIGN  | DSE          | CALL SIGN        | DSE         | CALL SIGN                 | DSE       | CALL SIGN        | DSE              |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
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|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |
| Total DSEs                                       |              |                  | 0.00        | Total DSEs                |           |                  | 0.00             |                  |
| Gross Receipts Third Gr                          | oup          | \$               | 0.00        | Gross Receipts Fourth     | Group     | \$               | 0.00             |                  |
| Base Rate Fee Third Gr                           | oup          | \$               | 0.00        | Base Rate Fee Fourth      | Group     | \$               | 0.00             |                  |
|  |              |                  |             | II                        |           |                  |                  |                  |
| Base Rate Fee: Add the Enter here and in block 3 |              |                  | ber group a | as shown in the boxes abo | ove.      | \$               |                  |                  |
|  |              |                  |             |                           |           |                  |                  |                  |

| LEGAL NAME OF OWNER Nortex Communica                |              |                 |             |                           |          | SYS              | 5984 | Name             |
|---|--------------|-----------------|-------------|---------------------------|----------|------------------|------|------------------|
| В   | LOCK A:      | COMPUTATION OF  | BASE RA     | TE FEES FOR EACH          | SUBSCRI  | BER GROUP        |      |                  |
| ONE HUNDRED FORT                                    |              |                 |             | (1)                       |          | SUBSCRIBER GROUP |      | _                |
| COMMUNITY/ AREA                                     |              |                 | 0           | COMMUNITY/ AREA           |          |                  | 0    | 9<br>Computation |
| CALL SIGN   | DSE          | CALL SIGN       | DSE         | CALL SIGN                 | DSE      | CALL SIGN        | DSE  | of               |
| CALL GIGIT  | DOL          | CALL SIGN       | DOL         | OALE GIGIN                | DOL      | OALL GIOIN       | DOL  | Base Rate Fee    |
|   |              |                 |             |                           |          |                  |      | and              |
|   | <b></b>      |                 |             |                           |          |                  |      | Syndicated       |
|   |              |                 |             | -                         |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      | Exclusivity      |
|   | <b></b>      |                 |             |                           |          |                  |      | Surcharge        |
|   |              |                 |             |                           |          |                  |      | for              |
|   |              |                 |             |                           |          | -                |      | Partially        |
|   |              |                 |             |                           |          |                  |      | Distant          |
|   |              |                 |             |                           |          | H                |      | Stations         |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
| Total DSEs  | <u> </u>     |                 | 0.00        | Total DSEs                | ·        | H                | 0.00 |                  |
| Gross Receipts First Gro                            | oup          | \$              | 0.00        | Gross Receipts Second     | d Group  | \$               | 0.00 |                  |
|   |              |                 |             |                           |          |                  |      |                  |
| Base Rate Fee First Gro                             | oup          | \$              | 0.00        | Base Rate Fee Second      | d Group  | \$               | 0.00 |                  |
| ONE HUNDRED FIF                                     | TY-FIRST     | SUBSCRIBER GROU | Р           | ONE HUNDRED FIFTY         | '-SECOND | SUBSCRIBER GROUP |      |                  |
| COMMUNITY/ AREA                                     |              |                 | 0           | COMMUNITY/ AREA           |          |                  | 0    |                  |
| CALL SIGN   | DSE          | CALL SIGN       | DSE         | CALL SIGN                 | DSE      | CALL SIGN        | DSE  |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
|   | <b>†</b>     |                 |             |                           |          | H                |      |                  |
|   | <b>†</b>     |                 |             |                           |          |                  |      |                  |
|   | <b></b>      |                 |             |                           |          |                  |      |                  |
|   | <del> </del> |                 |             |                           | <b></b>  | H                |      |                  |
|   | <b></b>      |                 |             |                           | <b></b>  |                  |      |                  |
|   | <b></b>      |                 |             |                           |          | H                |      |                  |
|   | <del> </del> |                 |             |                           | <b></b>  |                  |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |
| Total DSEs  |              |                 | 0.00        | Total DSEs                |          |                  | 0.00 |                  |
|   |              |                 |             | . 5.6.1 2 5 2 5           |          | -                |      |                  |
| Gross Receipts Third Gr                             | oup          | \$              | 0.00        | Gross Receipts Fourth     | Group    | \$               | 0.00 |                  |
| Base Rate Fee Third Gr                              | oup          | \$              | 0.00        | Base Rate Fee Fourth      | Group    | \$               | 0.00 |                  |
|   |              |                 |             |                           |          |                  |      |                  |
| Base Rate Fee: Add the<br>Enter here and in block 3 |              |                 | oer group a | as shown in the boxes abo | ove.     | \$               |      |                  |
|   |              |                 |             |                           |          |                  |      |                  |

| LEGAL NAME OF OWNER Nortex Communica              |          |                                   |                      |  |             | SY                            | STEM ID#<br>5984 | Name                |
|---|----------|-----------------------------------|----------------------|--|-------------|-------------------------------|------------------|---------------------|
|   |          | COMPUTATION OF<br>SUBSCRIBER GROU |                      | ATE FEES FOR EACH ONE HUNDRED FIFT COMMUNITY/ AREA |             | BER GROUP<br>SUBSCRIBER GROUP | 0                | 9                   |
|   |          |                                   |                      |  |             |                               |                  | Computation         |
| CALL SIGN   | DSE      | CALL SIGN                         | DSE                  | CALL SIGN  | DSE         | CALL SIGN                     | DSE              | of                  |
|   |          |                                   |                      |  |             |                               |                  | Base Rate Fee and   |
|   |          |                                   |                      |  |             |                               |                  | Syndicated          |
|   |          |                                   |                      |  |             |                               |                  | Exclusivity         |
|   |          |                                   |                      |  |             |                               |                  | Surcharge           |
|   |          |                                   |                      |  |             |                               |                  | for                 |
|   |          |                                   |                      |  |             |                               |                  | Partially           |
|   |          |                                   |                      |  |             |                               |                  | Distant<br>Stations |
|   | <b>†</b> |                                   |                      |  | <u> </u>    |                               |                  | - 12.1.0110         |
|   |          |                                   |                      |  |             |                               |                  |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
|   | <b>_</b> |                                   |                      |  |             |                               |                  |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
| T / LD05  | <u> </u> | <u> </u>                          | 0.00                 | T  |             | <u> </u>                      | 0.00             |                     |
| Total DSEs  |          |                                   | 0.00                 | Total DSEs   |             |                               | 0.00             |                     |
| Gross Receipts First Group \$ 0.00                |          | 0.00                              | Gross Receipts Secon | d Group  | \$          | 0.00                          |                  |                     |
| Base Rate Fee First Gro                           | oup      | \$                                | 0.00                 | Base Rate Fee Secon                                | d Group     | \$                            | 0.00             |                     |
| ONE HUNDRED FIF                                   | TY-FIFTH | SUBSCRIBER GROU                   | Р                    | ONE HUNDRED F                                      | FTY-SIXTH   | SUBSCRIBER GROUP              | )                |                     |
| COMMUNITY/ AREA                                   |          |                                   | 0                    | COMMUNITY/ AREA                                    |             |                               | 0                |                     |
| CALL SIGN   | DSE      | CALL SIGN                         | DSE                  | CALL SIGN  | DSE         | CALL SIGN                     | DSE              |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
|   |          |                                   |                      |  | <u> </u>    |                               |                  |                     |
|   | <b></b>  |                                   |                      |  | <del></del> |                               |                  |                     |
|   | <u> </u> |                                   |                      |  |             |                               |                  |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
|   | ļ        |                                   |                      |  |             |                               |                  |                     |
|   | <b>_</b> |                                   |                      |  |             |                               |                  |                     |
| Total DSEs  |          |                                   | 0.00                 | Total DSEs   |             |                               | 0.00             |                     |
|   | roup.    | •                                 | 0.00                 |  | Crous       | •                             | 0.00             |                     |
| Gross Receipts Third Gi                           | oup      | \$                                | 0.00                 | Gross Receipts Fourth                              | отоир       | \$                            | 0.00             |                     |
| Base Rate Fee Third G                             | oup      | \$                                | 0.00                 | Base Rate Fee Fourth                               | Group       | \$                            | 0.00             |                     |
|   |          |                                   |                      |  |             |                               |                  |                     |
| Base Rate Fee: Add the<br>Enter here and in block |          |                                   | ber group a          | as shown in the boxes at                           | oove.       | \$                            |                  |                     |
|   |          |                                   |                      |  |             | -                             |                  |                     |

| LEGAL NAME OF OWNER Nortex Communica |           |                         |             |                            |              | S                          | YSTEM ID#<br>5984 | Name                |
|--------------------------------------|-----------|-------------------------|-------------|----------------------------|--------------|----------------------------|-------------------|---------------------|
| ONE HUNDRED FIFTY-                   |           |                         | BASE RA     | ONE HUNDRED FIF            |              | BER GROUP SUBSCRIBER GROUP | 0                 | 9                   |
|                                      |           |                         |             |                            |              |                            |                   | Computation         |
| CALL SIGN                            | DSE       | CALL SIGN               | DSE         | CALL SIGN                  | DSE          | CALL SIGN                  | DSE               | of                  |
|                                      |           |                         |             |                            |              |                            |                   | Base Rate Fee       |
|                                      | <u></u>   |                         |             |                            |              |                            |                   | and<br>Syndicated   |
|                                      |           |                         |             |                            |              |                            |                   | Exclusivity         |
|                                      |           |                         |             |                            |              |                            |                   | Surcharge           |
|                                      |           |                         |             |                            |              |                            |                   | for                 |
|                                      |           |                         |             |                            |              |                            |                   | Partially           |
|                                      |           |                         |             |                            | -            |                            |                   | Distant<br>Stations |
|                                      | <u></u>   |                         |             |                            |              |                            | <u> </u>          | Glations            |
|                                      |           |                         |             |                            |              |                            |                   |                     |
|                                      |           |                         |             |                            |              |                            |                   |                     |
|                                      | <u></u>   |                         |             |                            |              |                            |                   |                     |
|                                      |           |                         |             |                            |              |                            |                   |                     |
|                                      | <u> </u>  |                         |             |                            | <u> </u>     | Ш                          | <u> </u>          |                     |
| Total DSEs                           |           |                         | 0.00        | Total DSEs                 |              |                            | 0.00              |                     |
| Gross Receipts First Gro             | oup       | \$                      | 0.00        | Gross Receipts Secon       | d Group      | \$                         | 0.00              |                     |
| Base Rate Fee First Gro              | oup       | \$                      | 0.00        | Base Rate Fee Second       | d Group      | \$                         | 0.00              |                     |
| ONE HUNDRED FIF                      | TY-NINTH  | SUBSCRIBER GROUP        |             | ii e                       | D SIXTIETH   | SUBSCRIBER GROUP           |                   |                     |
| COMMUNITY/ AREA                      |           |                         | 0           | COMMUNITY/ AREA            |              |                            | 0                 |                     |
| CALL SIGN                            | DSE       | CALL SIGN               | DSE         | CALL SIGN                  | DSE          | CALL SIGN                  | DSE               |                     |
|                                      |           |                         |             |                            |              |                            |                   |                     |
|                                      | <b></b>   |                         |             |                            |              |                            |                   |                     |
|                                      |           |                         |             |                            | •            |                            |                   |                     |
|                                      |           |                         |             |                            |              |                            |                   |                     |
|                                      |           |                         |             |                            |              |                            |                   |                     |
|                                      | ļ         |                         |             |                            |              |                            |                   |                     |
|                                      |           |                         |             |                            | <u> </u>     |                            |                   |                     |
|                                      | <b>1</b>  |                         |             |                            | <del> </del> |                            | <u> </u>          |                     |
|                                      | <b></b>   |                         |             |                            |              |                            | <u> </u>          |                     |
|                                      |           |                         |             |                            |              |                            |                   |                     |
|                                      | <u></u>   |                         |             |                            |              |                            |                   |                     |
|                                      | <u> </u>  |                         |             |                            |              |                            |                   |                     |
| Total DSEs                           |           |                         | 0.00        | Total DSEs                 | 1            |                            | 0.00              |                     |
|                                      |           | •                       |             |                            | Crour        | •                          |                   |                     |
| Gross Receipts Third Gr              | oup       | \$                      | 0.00        | Gross Receipts Fourth      | Group        | \$                         | 0.00              |                     |
| Base Rate Fee Third Gr               | oup       | \$                      | 0.00        | Base Rate Fee Fourth       | Group        | \$                         | 0.00              |                     |
| Base Rate Fee: Add the               | haso rota | a face for each subseri | her aroun   | as shown in the bayes sh   | 10/0         |                            |                   |                     |
| Enter here and in block              |           |                         | ooi gioup a | 20 SHOWIT III UIC DUXCS AD |              | \$                         |                   |                     |

| LEGAL NAME OF OWNE                             |                 |                   |              |                          |          | S               | SYSTEM ID# | Nama             |
|--|-----------------|-------------------|--------------|--------------------------|----------|-----------------|------------|------------------|
| Nortex Communic                                | ations C        | D                 |              |                          |          |                 | 5984       | Name             |
|  | BLOCK A:        | COMPUTATION OF    | BASE RA      | TE FEES FOR EACH         | SUBSCR   | BER GROUP       |            |                  |
|  |                 | SUBSCRIBER GROU   |              |                          |          | SUBSCRIBER GROU | JP         | _                |
| COMMUNITY/ AREA                                | Muens           | er, TX, Lake Kiov | va,Collin    | COMMUNITY/ AREA          |          |                 | 0          | 9<br>Computation |
| CALL SIGN                                      | DSE             | CALL SIGN         | DSE          | CALL SIGN                | DSE      | CALL SIGN       | DSE        | of               |
|  |                 |                   |              |                          |          |                 |            | Base Rate Fee    |
|  |                 |                   |              |                          |          |                 |            | and              |
|  |                 |                   |              |                          |          |                 |            | Syndicated       |
|  |                 |                   |              |                          |          |                 |            | Exclusivity      |
|  |                 |                   |              |                          |          |                 |            | Surcharge        |
|  |                 |                   |              |                          |          |                 |            | for              |
|  |                 |                   |              |                          |          |                 |            | Partially        |
|  |                 |                   |              |                          |          |                 |            | Distant          |
|  |                 |                   |              |                          |          |                 |            | Stations         |
|  |                 |                   | <u></u>      |                          |          |                 |            |                  |
|  |                 |                   | ļ            |                          |          |                 |            |                  |
|  |                 |                   | <u> </u>     |                          | <u> </u> |                 |            |                  |
|  |                 |                   | l            |                          | -        |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
| Total DSEs                                     |                 |                   | 0.00         | Total DSEs               |          |                 | 0.00       |                  |
| Gross Receipts First Group \$ 614,873.60       |                 |                   |              | Gross Receipts Secon     | d Group  | •               | 0.00       |                  |
| Gioss Receipts Filst G                         | roup            | 3 014             | ,073.00      | Gross Receipts Secon     | d Group  | \$              | 0.00       |                  |
| Base Rate Fee First G                          | roup            | \$                | 0.00         | Base Rate Fee Secon      | d Group  | \$              | 0.00       |                  |
|  | THIRD           | SUBSCRIBER GROU   | JP           |                          | FOURTH   | SUBSCRIBER GROU | JP         |                  |
| COMMUNITY/ AREA                                |                 |                   | 0            | COMMUNITY/ AREA          |          |                 | 0          |                  |
| CALL SIGN                                      | DSE             | CALL SIGN         | DSE          | CALL SIGN                | DSE      | CALL SIGN       | DSE        |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   | <u>.</u>     |                          | <u> </u> |                 |            |                  |
|  |                 |                   | ļ            |                          |          | -               |            |                  |
|  |                 |                   |              |                          | <b>-</b> | <u> </u>        |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
| Total DSEs                                     |                 |                   | 0.00         | Total DSEs               |          |                 | 0.00       |                  |
| Gross Receipts Third 0                         | Group           | \$                | 0.00         | Gross Receipts Fourth    | Group    | \$              | 0.00       |                  |
|  |                 |                   |              |                          |          |                 |            |                  |
| Base Rate Fee Third (                          | Group           | \$                | 0.00         | Base Rate Fee Fourth     | Group    | \$              | 0.00       |                  |
|  |                 |                   |              | Ш                        |          |                 |            |                  |
| Base Rate Fee: Add the Enter here and in block |                 |                   | iber group a | as shown in the boxes ab | oove.    | s               | 0.00       |                  |
| Line here and in biock                         | . J, IIIIC 1, S | udoe L (page 1)   |              |                          |          | <u> </u>        | 0.00       |                  |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |          |                         |            |                    |           |                |      |                  |  |
|---|----------|-------------------------|------------|--------------------|-----------|----------------|------|------------------|--|
|   | BLOCK A: | COMPUTATION (           | OF BASE RA | TE FEES FOR EAC    | CH SUBSCR | IBER GROUP     |      |                  |  |
|   |          | SUBSCRIBER GRO          |            |                    |           | SUBSCRIBER GRO |      | Ω                |  |
| COMMUNITY/ AREA   |          |                         | 0          | COMMUNITY/ ARE     | Α         |                | 0    | 9<br>Computatio  |  |
| CALL SIGN   | DSE      | CALL SIGN               | DSE        | CALL SIGN          | DSE       | CALL SIGN      | DSE  | of               |  |
|   |          |                         |            |                    |           |                |      | Base Rate F      |  |
|   |          |                         |            |                    |           |                |      | and              |  |
|   |          |                         |            |                    |           |                |      | Syndicated       |  |
|   |          |                         |            |                    | ·····     |                |      | Exclusivity      |  |
|   |          | -                       |            | -                  |           |                |      | Surcharge<br>for |  |
|   |          |                         |            |                    |           |                |      | Partially        |  |
|   |          |                         |            |                    |           |                |      | Distant          |  |
|   |          |                         |            |                    |           |                |      | Stations         |  |
|   |          | -                       |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
| Γotal DSEs  |          |                         | 0.00       | Total DSEs         |           |                | 0.00 |                  |  |
| Gross Receipts First Group \$ 0.00  |          |                         |            | Gross Receipts Sec | ond Group | \$             | 0.00 |                  |  |
|   |          |                         |            |                    |           |                | -    |                  |  |
| Base Rate Fee First   | Group    | \$                      | 0.00       | Base Rate Fee Sec  | ond Group | \$             | 0.00 |                  |  |
|   | SEVENTH  | SUBSCRIBER GRO          | OUP        |                    | EIGHTH    | SUBSCRIBER GRO | UP   |                  |  |
| COMMUNITY/ AREA   |          |                         | 0          | COMMUNITY/ ARE     | Α         |                | 0    |                  |  |
| CALL SIGN   | DSE      | CALL SIGN               | DSE        | CALL SIGN          | DSE       | CALL SIGN DSE  |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    | ·····     |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         | •••••      |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          | <b> </b>                |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
|   |          |                         |            |                    |           |                |      |                  |  |
| F 4 4 DC5   |          |                         | 0.00       | T                  |           |                | 0.00 |                  |  |
| Total DSEs  |          |                         | 0.00       | Total DSEs         |           | -              | 0.00 |                  |  |
| Gross Receipts Third  | l Group  | \$                      | 0.00       | Gross Receipts Fou | rth Group | \$             | 0.00 |                  |  |
| 3ase Rate Fee Third   | l Group  | \$                      | 0.00       | Base Rate Fee Fou  | rth Group | \$             | 0.00 |                  |  |
| Gross Receipts Third  Base Rate Fee Third   | Group    | \$ e fees for each subs | 0.00       | Gross Receipts Fou | rth Group |                | 0.00 |                  |  |

|  | EGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID# |                |                |                         |                                     |                 |      |                  |  |  |
|--|---|----------------|----------------|-------------------------|-------------------------------------|-----------------|------|------------------|--|--|
| Nortex Communic                                | ations Co                                       | 0.             |                |                         |                                     |                 | 5984 | Name             |  |  |
| E  | BLOCK A:  | COMPUTATION C  | F BASE RA      | ATE FEES FOR EACH       | SUBSCR                              | BER GROUP       |      |                  |  |  |
|  | NINTH   | SUBSCRIBER GRO | UP             |                         | TENTH                               | SUBSCRIBER GROU | JP   | ^                |  |  |
| COMMUNITY/ AREA                                |   |                | 0              | COMMUNITY/ AREA         |                                     |                 | 0    | 9<br>Computation |  |  |
| CALL SIGN                                      | DSE   | CALL SIGN      | DSE            | CALL SIGN               | DSE                                 | CALL SIGN       | DSE  | of               |  |  |
| CALL SIGN                                      | DOL   | CALL SIGN      | DOL            | CALL SIGN               | DSL                                 | CALL SIGN       | DOL  | Base Rate Fee    |  |  |
|  | <u></u>   |                | ····           |                         |                                     | <del></del>     |      | and              |  |  |
|  | <u> </u>  |                | ····           |                         | ···                                 |                 |      | Syndicated       |  |  |
|  | <u> </u>  |                | ····           |                         | ···                                 | -               |      | Exclusivity      |  |  |
|  |   |                |                |                         |                                     |                 |      | Surcharge        |  |  |
|  | ·   |                | ••••           |                         |                                     |                 |      | for              |  |  |
|  | ······  |                |                |                         |                                     |                 |      | Partially        |  |  |
|  |   |                |                |                         |                                     |                 |      | Distant          |  |  |
|  |   |                |                |                         |                                     |                 |      | Stations         |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
| Total DSEs                                     |   |                | 0.00           | Total DSEs              |                                     |                 | 0.00 |                  |  |  |
| Gross Receipts First Group \$ 0.00             |   |                | 0.00           | Gross Receipts Secon    | Gross Receipts Second Group \$ 0.00 |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
| Base Rate Fee First Gr                         | oup   | \$             | 0.00           | Base Rate Fee Secon     | nd Group                            | \$              | 0.00 |                  |  |  |
| Е  | LEVENTH   | SUBSCRIBER GRO | UP             |                         | TWELVTH                             | SUBSCRIBER GROU | JP   |                  |  |  |
| COMMUNITY/ AREA                                |   |                | 0              | COMMUNITY/ AREA         |                                     |                 | 0    |                  |  |  |
| CALL SIGN                                      | DSE   | CALL SIGN      | DSE            | CALL SIGN               | DSE                                 | CALL SIGN       | DSE  |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     |                 |      |                  |  |  |
|  | <u></u>   |                | <u></u>        |                         |                                     |                 |      |                  |  |  |
|  |   |                |                |                         |                                     | -               |      |                  |  |  |
|  | <del></del>                                     |                |                |                         | <u></u>                             | H               |      |                  |  |  |
|  | <del></del>                                     |                | ····           |                         |                                     | -               |      |                  |  |  |
|  | <del></del>                                     |                |                |                         |                                     |                 |      |                  |  |  |
|  | <u> </u>  |                |                |                         |                                     | ††              |      |                  |  |  |
| Total DSEs                                     | 1   | П              | 0.00           | Total DSEs              | 1                                   | 11              | 0.00 |                  |  |  |
|  |   |                |                |                         | Ore                                 | •               |      |                  |  |  |
| Gross Receipts Third G                         | roup  | \$             | 0.00           | Gross Receipts Fourth   | n Group                             | \$              | 0.00 |                  |  |  |
| Base Rate Fee Third G                          | roup  | \$             | 0.00           | Base Rate Fee Fourth    | n Group                             | \$              | 0.00 |                  |  |  |
| Base Rate Fee: Add the Enter here and in block |   |                | criber group a | as shown in the boxes a | bove.                               | s               |      |                  |  |  |

|                               | EGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID# |                 |           |                       |             |                 |      |                  |  |  |
|-------------------------------|---|-----------------|-----------|-----------------------|-------------|-----------------|------|------------------|--|--|
| Nortex Communica              | itions Co                                       | D.              |           |                       |             |                 | 5984 | Name             |  |  |
| В                             | LOCK A:   | COMPUTATION O   | F BASE RA | ATE FEES FOR EACH     | SUBSCR      | IBER GROUP      |      |                  |  |  |
| THIF                          | RTEENTH   | SUBSCRIBER GROU | JP        | FOL                   | JRTEENTH    | SUBSCRIBER GROU | Р    | 0                |  |  |
| COMMUNITY/ AREA               |   |                 | 0         | COMMUNITY/ AREA       |             |                 | 0    | 9<br>Computation |  |  |
| CALL SIGN                     | DSE   | CALL SIGN       | DSE       | CALL SIGN             | DSE         | CALL SIGN       | DSE  | of               |  |  |
| CALL SIGN                     | DSL   | CALL SIGN       | DSL       | CALL SIGN             | DSL         | CALL SIGN       | DOL  | Base Rate Fee    |  |  |
|                               |   |                 |           |                       | <del></del> |                 |      | and              |  |  |
|                               |   |                 |           |                       |             |                 |      | Syndicated       |  |  |
|                               |   |                 |           |                       |             |                 |      | Exclusivity      |  |  |
|                               |   |                 |           |                       |             |                 |      | Surcharge        |  |  |
|                               |   |                 |           |                       |             |                 |      | for              |  |  |
|                               |   |                 |           |                       |             |                 |      | Partially        |  |  |
|                               |   |                 |           |                       |             |                 |      | Distant          |  |  |
|                               |   |                 |           |                       |             |                 |      | Stations         |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
|                               | <u> </u>  |                 |           |                       | <u>.</u>    |                 |      |                  |  |  |
|                               |   |                 |           |                       | <u></u>     |                 |      |                  |  |  |
|                               | <u> </u>  |                 |           |                       | <u>.</u>    |                 |      |                  |  |  |
|                               | <u></u>   |                 |           |                       | <u></u>     |                 |      |                  |  |  |
| T                             |   | <u>I</u>        | 0.00      | T + 1 DOF             |             | 11              | 0.00 |                  |  |  |
| otal DSEs 0.00                |   |                 |           | Total DSEs            |             |                 |      |                  |  |  |
| Gross Receipts First Gro      | oup   | \$              | 0.00      | Gross Receipts Secon  | d Group     | \$              | 0.00 |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
| Base Rate Fee First Gro       | oup   | \$              | 0.00      | Base Rate Fee Secon   | d Group     | \$              | 0.00 |                  |  |  |
| FIF                           | TEENTH  | SUBSCRIBER GROU | JP        | S                     | SIXTEENTH   | SUBSCRIBER GROU | Р    |                  |  |  |
| COMMUNITY/ AREA               |   |                 | 0         | COMMUNITY/ AREA       |             |                 | 0    |                  |  |  |
| CALL SIGN                     | DSE   | CALL SIGN       | DSE       | CALL SIGN             | DSE         | CALL SIGN       | DSE  |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
|                               | <b></b>   |                 |           |                       |             |                 |      |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
|                               | <b></b>   |                 |           |                       | <u></u>     |                 |      |                  |  |  |
|                               | <b></b>   |                 |           |                       | <u> </u>    |                 |      |                  |  |  |
|                               |   |                 |           |                       | <del></del> |                 |      |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
|                               | <u></u>   |                 |           |                       |             |                 |      |                  |  |  |
|                               |   |                 |           |                       |             |                 |      |                  |  |  |
| Total DSEs                    |   |                 | 0.00      | Total DSEs            |             |                 | 0.00 |                  |  |  |
| Gross Receipts Third Gr       |   | \$              | 0.00      | Gross Receipts Fourth | Group       | \$              | 0.00 |                  |  |  |
|                               | oup   |                 |           |                       |             |                 |      |                  |  |  |
|                               | oup   |                 |           |                       |             |                 |      |                  |  |  |
| Base Rate Fee Third Gr        |   | \$              | 0.00      | Base Rate Fee Fourth  | Group       | \$              | 0.00 |                  |  |  |
| <b>Base Rate Fee</b> Third Gr |   | \$              | 0.00      | Base Rate Fee Fourth  | Group       | \$              | 0.00 |                  |  |  |
|                               | oup   |                 |           | Base Rate Fee Fourth  |             | \$              | 0.00 |                  |  |  |

|                       | EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# |                 |                |                         |           |                 |             |                |  |  |
|-----------------------|--|-----------------|----------------|-------------------------|-----------|-----------------|-------------|----------------|--|--|
| Nortex Commun         | ications C                                     | 0.              |                |                         |           |                 | 5984        | Name           |  |  |
|                       | BLOCK A:                                       | COMPUTATION O   | OF BASE RA     | ATE FEES FOR EACH       | SUBSCR    | IBER GROUP      |             |                |  |  |
| SE                    | VENTEENTH                                      | SUBSCRIBER GRO  | DUP            | EI                      | GHTEENTH  | SUBSCRIBER GROU | JP          | 0              |  |  |
| COMMUNITY/ AREA       |  |                 | 0              | COMMUNITY/ AREA         |           |                 | 0           | 9              |  |  |
| CALL SIGN             | DSE  | CALL SIGN       | DSE            | CALL SIGN               | DSE       | CALL SIGN       | Dee         | Computation of |  |  |
| CALL SIGN             | DSE  | CALL SIGN       | DSE            | CALL SIGN               | DSE       | CALL SIGN       | DSE         | Base Rate Fee  |  |  |
|                       |  | <b> </b>        |                |                         | ····      |                 |             | and            |  |  |
|                       |  |                 |                |                         |           |                 |             | Syndicated     |  |  |
|                       |  |                 |                |                         |           |                 |             | Exclusivity    |  |  |
|                       |  |                 |                |                         |           |                 |             | Surcharge      |  |  |
|                       |  |                 |                |                         |           |                 |             | for            |  |  |
|                       |  |                 |                |                         |           |                 |             | Partially      |  |  |
|                       |  |                 |                |                         |           |                 |             | Distant        |  |  |
|                       |  |                 |                |                         |           |                 |             | Stations       |  |  |
|                       |  | H               |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
| Total DSEs            |  |                 | 0.00           | Total DSEs              |           |                 | 0.00        |                |  |  |
|                       |  |                 |                | Gross Receipts Secon    |           |                 |             |                |  |  |
| Gioss Neceipis i list | Group  | \$              | 0.00           | Gross Neceipts Secon    | iu Group  | \$              | 0.00        |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
| Base Rate Fee First   | Group  | \$              | 0.00           | Base Rate Fee Secon     | nd Group  | \$              | 0.00        |                |  |  |
|                       | NINTEENTH                                      | SUBSCRIBER GRO  | DUP            | 1                       | TWENTIETH | SUBSCRIBER GRO  | JP          |                |  |  |
| COMMUNITY/ AREA       | ٨  |                 | 0              | COMMUNITY/ AREA         |           |                 | 0           |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
| CALL SIGN             | DSE  | CALL SIGN       | DSE            | CALL SIGN               | DSE       | CALL SIGN       | DSE         |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  | <b> </b>        |                |                         |           |                 |             |                |  |  |
|                       |  | <b> </b>        |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         | ••••      |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  | -               |                |                         |           |                 |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
| Total DSEs            |  | Ш               | 0.00           | Total DSCs              |           | 11              | 0.00        |                |  |  |
| Total DSEs            |  |                 | 0.00           | Total DSEs              |           |                 | 0.00        |                |  |  |
| Gross Receipts Third  | d Group  | \$              | 0.00           | Gross Receipts Fourth   | h Group   | \$              | 0.00        |                |  |  |
|                       |  |                 |                |                         |           |                 | $\neg \neg$ |                |  |  |
| Base Rate Fee Third   | d Group  | \$              | 0.00           | Base Rate Fee Fourth    | h Group   | \$              | 0.00        |                |  |  |
|                       |  |                 |                |                         |           | •               |             |                |  |  |
|                       |  |                 |                |                         |           |                 |             |                |  |  |
|                       |  |                 | criber group a | as shown in the boxes a | bove.     |                 |             |                |  |  |
| Enter here and in blo | ock 3, line 1, s                               | pace L (page 7) |                |                         |           | \$              |             |                |  |  |

| LEGAL NAME OF OWNER Nortex Communica             |         |                                     |              |                          |              | S                          | STEM ID#<br>5984 | Name              |
|--|---------|-------------------------------------|--------------|--------------------------|--------------|----------------------------|------------------|-------------------|
|  |         |                                     |              |                          |              |                            | 3304             |                   |
|  |         | COMPUTATION OF<br>SUBSCRIBER GROUND |              | TE FEES FOR EACH         |              | BER GROUP SUBSCRIBER GROUF | <u> </u>         |                   |
| COMMUNITY/ AREA                                  |         | ODBOTTIBLIT OROC                    | 0            | COMMUNITY/ AREA          |              | CODOCNIBLIC GROOT          | 0                | 9                 |
| CALL SIGN  | DSE     | CALL SIGN                           | DSE          | CALL SIGN                | DSE          | CALL SIGN                  | DSE              | Computation<br>of |
| CALL SIGN  | DOL     | CALL SIGN                           | DOL          | CALL SIGN                | DSL          | CALL SIGIN                 | DSL              | Base Rate Fee     |
|  |         |                                     |              |                          |              |                            | ···              | and               |
|  |         |                                     |              |                          |              |                            |                  | Syndicated        |
|  |         |                                     |              |                          |              |                            |                  | Exclusivity       |
|  |         |                                     |              |                          |              |                            |                  | Surcharge         |
|  |         |                                     |              |                          |              |                            |                  | for               |
|  |         |                                     |              |                          |              |                            |                  | Partially         |
|  |         |                                     |              |                          |              |                            |                  | Distant           |
|  |         |                                     |              |                          |              |                            |                  | Stations          |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            | <del></del>      |                   |
|  |         |                                     |              |                          |              |                            | ···              |                   |
|  |         |                                     |              |                          |              |                            | ···              |                   |
|  |         |                                     |              |                          |              |                            | <u></u>          |                   |
| Total DSEs                                       |         |                                     | 0.00         | Total DSEs               | <del>'</del> |                            | 0.00             |                   |
| Gross Receipts First Gro                         | oup     | \$                                  | 0.00         | Gross Receipts Second    | d Group      | \$                         | 0.00             |                   |
| Base Rate Fee First Gro                          | oup     | \$                                  | 0.00         | Base Rate Fee Second     | d Group      | \$                         | 0.00             |                   |
| TWENT  | Y-THIRD | SUBSCRIBER GROU                     | JP           | TWENT                    | /-FOURTH     | SUBSCRIBER GROUP           | )                |                   |
| COMMUNITY/ AREA                                  |         |                                     | 0            | COMMUNITY/ AREA          |              |                            | 0                |                   |
| CALL SIGN  | DSE     | CALL SIGN                           | DSE          | CALL SIGN                | DSE          | CALL SIGN                  | DSE              |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            | ···              |                   |
|  |         |                                     |              |                          |              |                            | ···              |                   |
|  |         |                                     | •            |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
|  |         |                                     |              |                          |              |                            |                  |                   |
| Total DSEs                                       |         |                                     | 0.00         | Total DSEs               |              |                            | 0.00             |                   |
| Cross Bossints Third Cr                          | oup.    | •                                   | 0.00         | Cross Bossints Fourth    | Croup        | •                          | 0.00             |                   |
| Gross Receipts Third Gr                          | oup     | <u>\$</u>                           | 3.00         | Gross Receipts Fourth    | огоир        | \$                         | 0.00             |                   |
| Base Rate Fee Third Gr                           | oup     | \$                                  | 0.00         | Base Rate Fee Fourth     | Group        | \$                         | 0.00             |                   |
| Base Rate Fee: Add the Enter here and in block 3 |         |                                     | iber group a | as shown in the boxes ab | ove.         | \$                         |                  |                   |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |           |                |                |                       |            |                |      |                          |  |
|---|-----------|----------------|----------------|-----------------------|------------|----------------|------|--------------------------|--|
|   | BLOCK A:  | COMPUTATION (  | OF BASE RA     | TE FEES FOR EAC       | CH SUBSCR  | IBER GROUP     |      |                          |  |
|   |           | SUBSCRIBER GRO |                |                       |            | SUBSCRIBER GRO |      | 9                        |  |
| COMMUNITY/ AREA   |           |                | 0              | COMMUNITY/ ARE        | Α          |                | 0    | Computation              |  |
| CALL SIGN   | DSE       | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN      | DSE  | of                       |  |
|   |           |                |                |                       |            |                |      | Base Rate F              |  |
|   |           |                |                |                       |            |                |      | and                      |  |
|   |           |                |                |                       |            |                |      | Syndicated               |  |
|   |           |                |                | -                     |            |                |      | Exclusivity<br>Surcharge |  |
|   |           |                |                |                       |            |                |      | for                      |  |
|   |           |                |                |                       |            |                |      | Partially                |  |
|   |           |                |                |                       |            |                |      | Distant                  |  |
|   |           |                |                |                       |            |                |      | Stations                 |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           | <b> </b>       |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
| Total DSEs  |           |                | 0.00           | Total DSEs            |            |                | 0.00 |                          |  |
| Gross Receipts First Group \$ 0.0   |           |                |                | Gross Receipts Sec    | ond Group  | \$             | 0.00 |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
| Base Rate Fee First   | Group     | \$             | 0.00           | Base Rate Fee Sec     | ond Group  | \$             | 0.00 |                          |  |
| TWENT   | Y-SEVENTH | SUBSCRIBER GRO | DUP            | TWE                   | NTY-EIGHTH | SUBSCRIBER GRO | UP   |                          |  |
| COMMUNITY/ AREA   |           |                | 0              | COMMUNITY/ ARE        | Α          |                | 0    |                          |  |
| CALL SIGN   | DSE       | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN      |      |                          |  |
|   |           |                |                |                       |            |                | DSE  |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
|   |           | <u> </u>       |                |                       |            |                |      |                          |  |
|   |           |                |                |                       |            |                |      |                          |  |
| Γotal DSEs  |           |                | 0.00           | Total DSEs            |            | _              | 0.00 |                          |  |
| Gross Receipts Third  | l Group   | \$             | 0.00           | Gross Receipts Fou    | rth Group  | \$             | 0.00 |                          |  |
| 2.230 (1000ipio 11iiiu  | . J. Jup  | *              |                | Cross rescripto i ou  | Олоцр      | *              |      |                          |  |
| Base Rate Fee Third   | l Group   | \$             | 0.00           | Base Rate Fee Fou     | rth Group  | \$             | 0.00 |                          |  |
| Base Rate Fee: Add<br>Enter here and in blo                                       |           |                | criber group a | as shown in the boxes | above.     | \$             |      |                          |  |

|                         | EGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID# |                       |             |   |          |                  |      |                     |  |  |
|-------------------------|---|-----------------------|-------------|---|----------|------------------|------|---------------------|--|--|
| Nortex Communic         | ations Co                                       | o.                    |             |   |          |                  | 5984 | Name                |  |  |
|                         |   |                       |             | ATE FEES FOR EACH   |          |                  |      |                     |  |  |
|                         | TY-NINTH  | SUBSCRIBER GRO        |             | Ti .  | HIRTIETH | SUBSCRIBER GROU  |      | 9                   |  |  |
| COMMUNITY/ AREA         |   |                       | 0           | COMMUNITY/ AREA   |          |                  | 0    | Computation         |  |  |
| CALL SIGN               | DSE   | CALL SIGN             | DSE         | CALL SIGN   | DSE      | CALL SIGN        | DSE  | of                  |  |  |
| Of ILL OTOTA            | 562   | Or ILL GIGIT          | 562         | O/ IEE GIGIT  | BOL      | OF ILL STOTE     | 562  | Base Rate Fee       |  |  |
|                         |   |                       |             |   |          |                  |      | and                 |  |  |
|                         |   |                       |             |   |          |                  |      | Syndicated          |  |  |
|                         |   |                       |             |   |          |                  |      | Exclusivity         |  |  |
|                         |   |                       |             |   |          | -                |      | Surcharge           |  |  |
|                         |   |                       |             |   |          |                  |      | for                 |  |  |
|                         | <u></u>   |                       |             |   |          |                  |      | Partially           |  |  |
|                         | <del>.  </del>                                  |                       | ····        |   |          | -                |      | Distant<br>Stations |  |  |
|                         | <u> </u>  |                       | ••••        | -   |          | -                |      | Otations            |  |  |
|                         | <u> </u>  |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   | ļ        |                  |      |                     |  |  |
|                         |   |                       |             |   | <u> </u> | П                |      |                     |  |  |
| Total DSEs              |   |                       | 0.00        | Total DSEs  |          |                  | 0.00 |                     |  |  |
| Gross Receipts First Gr | Gross Receipts First Group \$ 0.00              |                       |             | Gross Receipts Second   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
| Base Rate Fee First Gr  | oup   | \$                    | 0.00        | Base Rate Fee Second  | d Group  | \$               | 0.00 |                     |  |  |
| THIR                    | TY-FIRST  | SUBSCRIBER GRO        | UP          | THIRTY  | -SECOND  | SUBSCRIBER GROU  | IP   |                     |  |  |
| COMMUNITY/ AREA         | 111-11101                                       | CODOCKIDEN CINC       | 0           | COMMUNITY/ AREA   | -OLOGIND | CODCONIDEN CINCO | 0    |                     |  |  |
| OOMMONT IT TAKEN        |   |                       |             | CONTROLLER TO THE PARTY OF THE |          |                  |      |                     |  |  |
| CALL SIGN               | DSE   | CALL SIGN             | DSE         | CALL SIGN   | DSE      | CALL SIGN        | DSE  |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         | <u></u>   |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         | <u></u>   |                       |             |   |          |                  |      |                     |  |  |
|                         | <del>.  </del>                                  |                       | ····        |   |          | -                |      |                     |  |  |
|                         | <del></del>                                     |                       |             |   | ·        |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
|                         |   |                       |             |   |          |                  |      |                     |  |  |
| Total DSEs              |   |                       | 0.00        | Total DSEs  | 1        |                  | 0.00 |                     |  |  |
|                         |   |                       |             |   |          |                  | -    |                     |  |  |
| Gross Receipts Third G  | roup  | \$                    | 0.00        | Gross Receipts Fourth   | Group    | \$               | 0.00 |                     |  |  |
|                         |   |                       |             |   | _        |                  |      |                     |  |  |
| Base Rate Fee Third G   | roup  | \$                    | 0.00        | Base Rate Fee Fourth  | Group    | \$               | 0.00 |                     |  |  |
|                         |   |                       |             | <u>II</u>   |          |                  |      |                     |  |  |
| Base Rate Fee: Add the  | e <b>haso</b> rate                              | a fees for each subse | riber group | as shown in the boxes ab  | ove      |                  |      |                     |  |  |
| Enter here and in block |   |                       | group (     | and shows an are boxes ab   |          | \$               |      |                     |  |  |

|                                    | EGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID# |                 |              |                         |   |                 |      |                   |  |  |
|------------------------------------|---|-----------------|--------------|-------------------------|---|-----------------|------|-------------------|--|--|
| Nortex Commur                      | ications C                                      | 0.              |              |                         |   |                 | 5984 | Name              |  |  |
|                                    |   |                 |              | TE FEES FOR EACH        |   |                 |      |                   |  |  |
|                                    |   | SUBSCRIBER GRO  |              | ii e                    |   | SUBSCRIBER GROU |      | 9                 |  |  |
| COMMUNITY/ AREA                    | Α   |                 | 0            | COMMUNITY/ AREA         |   |                 | 0    |                   |  |  |
| CALL SIGN                          | DSE   | CALL SIGN       | DSE          | CALL SIGN               | DSE                                     | CALL SIGN       | DSE  | Computation<br>of |  |  |
| CALL SIGN                          | DSE   | CALL SIGN       | DSE          | CALL SIGN               | DSE                                     | CALL SIGN       | DOE  | Base Rate Fe      |  |  |
|                                    |   |                 |              |                         |   |                 |      | and               |  |  |
|                                    |   |                 |              |                         |   |                 |      | Syndicated        |  |  |
|                                    |   |                 |              |                         |   |                 |      | Exclusivity       |  |  |
|                                    |   |                 |              |                         |   |                 |      | Surcharge         |  |  |
|                                    |   |                 |              |                         |   |                 |      | for               |  |  |
|                                    |   |                 |              |                         |   |                 |      | Partially         |  |  |
|                                    |   |                 |              |                         |   |                 |      | Distant           |  |  |
|                                    |   | -               |              |                         |   |                 |      | Stations          |  |  |
|                                    |   | <b> </b>        |              |                         | ····                                    |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
| Total DSEs                         |   |                 | 0.00         | Total DSEs              |   |                 | 0.00 |                   |  |  |
| Gross Receipts First Group \$ 0.00 |   |                 | 0.00         | Gross Receipts Seco     | Gross Receipts Second Group \$ 0.00     |                 |      |                   |  |  |
|                                    |   | ·               |              |                         | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | <u>·</u>        |      |                   |  |  |
| Page Pate Foe First                | Croup   |                 | 0.00         | Page Pate Fee Speed     | nd Croup                                |                 | 0.00 |                   |  |  |
| Base Rate Fee First                | Group   | \$              | 0.00         | Base Rate Fee Secon     | na Group                                | \$              | 0.00 |                   |  |  |
| Т                                  | HIRTY-FIFTH                                     | SUBSCRIBER GRO  | DUP          | TH                      | IRTY-SIXTH                              | SUBSCRIBER GROU | UP   |                   |  |  |
| COMMUNITY/ AREA                    | Α   |                 | 0            | COMMUNITY/ AREA         |   |                 | 0    |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
| CALL SIGN                          | DSE   | CALL SIGN       | DSE          | CALL SIGN               | DSE                                     | CALL SIGN       | DSE  |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   | -               |              |                         |   |                 |      |                   |  |  |
|                                    |   | -               |              |                         |   |                 |      |                   |  |  |
|                                    |   | <b> </b>        |              |                         | ••••                                    |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              | -                       |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   | <u> </u>        |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
| Total DSEs                         |   |                 | 0.00         | Total DSEs              |   |                 | 0.00 |                   |  |  |
|                                    |   |                 |              |                         |   |                 | -    |                   |  |  |
| Gross Receipts Third               | a Group   | \$              | 0.00         | Gross Receipts Fourt    | n Group                                 | \$              | 0.00 |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
| Base Rate Fee Thire                | d Group   | \$              | 0.00         | Base Rate Fee Fourt     | h Group                                 | \$              | 0.00 |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 |              |                         |   |                 |      |                   |  |  |
|                                    |   |                 | criber group | as shown in the boxes a | bove.                                   | ¢               |      |                   |  |  |
| Enter here and in blo              | JUK J, IINE T, S                                | pace ∟ (page /) |              |                         |   | <b>3</b>        |      |                   |  |  |

| LEGAL NAME OF OWNER                            |           |                 |  |                          |          | S                | YSTEM ID# | Name                 |
|--|-----------|-----------------|--|--------------------------|----------|------------------|-----------|----------------------|
| Nortex Communica                               | itions Co | ).<br>          |  |                          |          |                  | 5984      |                      |
|  |           |                 |  | TE FEES FOR EACH         |          |                  |           |                      |
|  | SEVENTH   | SUBSCRIBER GROU |  | TI .                     | Y-EIGHTH | SUBSCRIBER GROUP |           | 9                    |
| COMMUNITY/ AREA                                |           |                 | 0                                      | COMMUNITY/ AREA          |          |                  | 0         | Computation          |
| CALL SIGN                                      | DSE       | CALL SIGN       | DSE                                    | CALL SIGN                | DSE      | CALL SIGN        | DSE       | of                   |
|  |           |                 |  |                          |          |                  |           | Base Rate Fee        |
|  |           |                 |  |                          |          |                  |           | and                  |
|  |           |                 |  |                          |          |                  |           | Syndicated           |
|  |           |                 |  |                          |          |                  |           | Exclusivity          |
|  |           |                 |  |                          |          |                  |           | Surcharge            |
|  |           |                 |  |                          |          |                  |           | for                  |
|  |           |                 | <u> </u>                               |                          |          |                  | ····      | Partially<br>Distant |
|  |           |                 |  |                          |          |                  |           | Stations             |
|  |           |                 |  |                          |          |                  |           | Otations             |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 | •                                      |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
| Total DSEs                                     |           |                 | 0.00                                   | Total DSEs               |          |                  | 0.00      |                      |
| Gross Receipts First Group \$                  |           |                 | 0.00                                   | Gross Receipts Second    | 0.00     |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
| Base Rate Fee First Gro                        | oup       | \$              | 0.00                                   | Base Rate Fee Second     | d Group  | \$               | 0.00      |                      |
| THIR   | Y-NINTH   | SUBSCRIBER GROU | JP                                     |                          | FORTIETH | SUBSCRIBER GROUP | 5         |                      |
| COMMUNITY/ AREA                                |           |                 | 0                                      | COMMUNITY/ AREA          |          |                  | 0         |                      |
| CALL SIGN                                      | DSE       | CALL SIGN       | DSE                                    | CALL SIGN                | DSE      | CALL SIGN        | DSE       |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 | ······································ |                          |          |                  |           |                      |
|  |           |                 |  |                          |          | <u> </u>         |           |                      |
|  |           |                 | •                                      |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
|  |           |                 |  |                          |          |                  |           |                      |
| Total DSEs                                     |           |                 | 0.00                                   | Total DSEs               |          |                  | 0.00      |                      |
|  | OUD       | ¢               | 0.00                                   |                          | Group    | •                | 0.00      |                      |
| Gross Receipts Third Gr                        | oup       | \$              | 3.00                                   | Gross Receipts Fourth    | огоир    | \$               | 0.00      |                      |
| Base Rate Fee Third Gr                         | oup       | \$              | 0.00                                   | Base Rate Fee Fourth     | Group    | \$               | 0.00      |                      |
| Base Rate Fee: Add the Enter here and in block |           |                 | riber group a                          | as shown in the boxes ab | ove.     | \$               |           |                      |

|                                    | EGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID#  Jortex Communications Co.  5984 |                 |                |                         |   |                 |          |                      |  |  |
|------------------------------------|--|-----------------|----------------|-------------------------|---|-----------------|----------|----------------------|--|--|
| NOTIEX COMMUN                      | ications C   | u.<br>          |                |                         |   |                 | 5984     | Name                 |  |  |
|                                    |  |                 |                | TE FEES FOR EACH        |   |                 |          |                      |  |  |
|                                    |  | SUBSCRIBER GRO  |                | ii e                    |   | SUBSCRIBER GROU |          | 9                    |  |  |
| COMMUNITY/ AREA                    |  |                 | 0              | COMMUNITY/ AREA         |   |                 | 0        | Computation          |  |  |
| CALL SIGN                          | DSE  | CALL SIGN       | DSE            | CALL SIGN               | DSE                                     | CALL SIGN       | DSE      | of                   |  |  |
| 31.12.21311                        |  |                 |                |                         |   |                 |          | Base Rate Fee        |  |  |
|                                    |  |                 |                |                         |   |                 |          | and                  |  |  |
|                                    |  |                 |                |                         |   |                 |          | Syndicated           |  |  |
|                                    |  |                 |                |                         |   |                 |          | Exclusivity          |  |  |
|                                    |  |                 |                |                         |   |                 |          | Surcharge            |  |  |
|                                    |  |                 |                |                         |   |                 |          | for                  |  |  |
|                                    |  | -               |                |                         |   |                 |          | Partially<br>Distant |  |  |
|                                    |  |                 |                |                         |   |                 |          | Stations             |  |  |
|                                    |  | <b> </b>        |                |                         | ····                                    |                 |          | 0                    |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
| Total DSEs                         |  |                 | 0.00           | Total DSEs              |   |                 | 0.00     |                      |  |  |
| Gross Receipts First Group \$ 0.00 |  |                 | 0.00           | Gross Receipts Seco     |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
| Base Rate Fee First                | Group  | \$              | 0.00           | Base Rate Fee Secon     | nd Group                                | \$              | 0.00     |                      |  |  |
|                                    | DTV TUIDD  | SUBSCRIBER GRO  | ) I I D        | EOP                     | TV EQUIPTL                              | SUBSCRIBER GROU | ID       |                      |  |  |
|                                    |  | SUBSCRIBER GRO  | <b>0</b>       | COMMUNITY/ AREA         |   | SUBSCRIBER GRO  | 0        |                      |  |  |
| COMMUNITY/ AREA                    |  |                 | <u> </u>       | COMMUNITY AREA          | *************************************** |                 | <u> </u> |                      |  |  |
| CALL SIGN                          | DSE  | CALL SIGN       | DSE            | CALL SIGN               | DSE                                     | CALL SIGN       | DSE      |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         | ·····                                   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  | <b> </b>        |                |                         | ····                                    |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  |                 |                |                         |   |                 |          |                      |  |  |
|                                    |  | <b> </b>        |                |                         |   |                 |          |                      |  |  |
| Total DSEs                         |  |                 | 0.00           | Total DSEs              |   |                 | 0.00     |                      |  |  |
|                                    |  |                 |                | Total DSEs              |   |                 | -        |                      |  |  |
| Gross Receipts Third               | l Group  | \$              | 0.00           | Gross Receipts Fourt    | h Group                                 | \$              | 0.00     |                      |  |  |
| Bass Bass E. Till                  | 1.0  |                 | 2 22           | Dana Bata E . E . E     | h O-                                    |                 |          |                      |  |  |
| Base Rate Fee Third                | Group  | \$              | 0.00           | Base Rate Fee Fourt     | n Group                                 | \$              | 0.00     |                      |  |  |
|                                    |  |                 |                | Ш                       |   |                 |          |                      |  |  |
|                                    |  |                 | criber group a | as shown in the boxes a | bove.                                   |                 |          |                      |  |  |
| Enter here and in blo              | ck 3, line 1, s  | pace L (page 7) |                |                         |   | \$              |          |                      |  |  |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |              |                      |            |                       |            |                |      |                  |  |
|---|--------------|----------------------|------------|-----------------------|------------|----------------|------|------------------|--|
|   | BLOCK A:     | COMPUTATION (        | OF BASE RA | TE FEES FOR EAC       | CH SUBSCR  | IBER GROUP     |      |                  |  |
| F   | ORTY-FIFTH   | SUBSCRIBER GRO       | DUP        | F                     | ORTY-SIXTH | SUBSCRIBER GRO | UP   | 0                |  |
| COMMUNITY/ AREA   |              |                      | 0          | COMMUNITY/ ARE        | Α          |                | 0    | 9<br>Commutatio  |  |
| CALL SIGN   | DSE          | CALL SIGN            | DSE        | CALL SIGN             | DSE        | CALL SIGN      | DSE  | Computation of   |  |
|   |              |                      |            |                       |            |                |      | Base Rate F      |  |
|   |              |                      |            |                       |            |                |      | and              |  |
|   |              |                      |            |                       |            |                |      | Syndicated       |  |
|   |              | <b> </b>             |            |                       |            |                |      | Exclusivity      |  |
|   |              | -                    |            |                       |            |                |      | Surcharge<br>for |  |
|   |              |                      |            |                       |            |                |      | Partially        |  |
|   |              |                      |            |                       |            |                |      | Distant          |  |
|   |              |                      |            |                       |            |                |      | Stations         |  |
|   |              | <u> </u>             |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              | <b> </b>             |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
| otal DSEs   |              | II .                 | 0.00       | Total DSEs            |            |                | 0.00 |                  |  |
|   |              |                      |            |                       |            |                | -    |                  |  |
| Gross Receipts First Group \$ 0.00  |              |                      | 0.00       | Gross Receipts Sec    | ond Group  | \$             | 0.00 |                  |  |
| ase Rate Fee First  | Group        | \$                   | 0.00       | Base Rate Fee Sec     | ond Group  | \$             | 0.00 |                  |  |
| FORT  | Y-SEVENTH    | SUBSCRIBER GRO       | DUP        | FC                    | RTY-EIGHTH | SUBSCRIBER GRO | UP   |                  |  |
| COMMUNITY/ AREA   |              |                      | 0          | COMMUNITY/ ARE        | Α          |                | 0    |                  |  |
| CALL SIGN   | DSE          | CALL SIGN            | DSE        | CALL SIGN             | DSE        | CALL SIGN      | DSE  |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              | <b> </b>             |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              | <b> </b>             |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
|   |              |                      |            |                       |            |                |      |                  |  |
| 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 |                  |  |
|   | the base rat | e fees for each subs |            | as shown in the boxes |            | \$             |      |                  |  |

| LEGAL NAME OF OW                   |                  |                 |                |                          |             |                 | YSTEM ID# | Name             |
|------------------------------------|------------------|-----------------|----------------|--------------------------|-------------|-----------------|-----------|------------------|
| Nortex Commur                      | ications C       | 0.              |                |                          |             |                 | 5984      | Hailie           |
|                                    | BLOCK A:         | COMPUTATION C   | OF BASE RA     | TE FEES FOR EACH         | SUBSCR      | IBER GROUP      |           |                  |
|                                    |                  | SUBSCRIBER GRO  |                |                          | FIFTIETH    | SUBSCRIBER GROU |           | ٥                |
| COMMUNITY/ AREA                    | A                |                 | 0              | COMMUNITY/ AREA          |             |                 | 0         | 9<br>Computation |
| CALL SIGN                          | DSE              | CALL SIGN       | DSE            | CALL SIGN                | DSE         | CALL SIGN       | DSE       | Computation of   |
| CALL SIGN                          | DSE              | CALL SIGN       | DSE            | CALL SIGN                | DSE         | CALL SIGN       | DSE       | Base Rate Fee    |
|                                    |                  |                 |                |                          |             |                 |           | and              |
|                                    |                  |                 |                |                          |             |                 |           | Syndicated       |
|                                    |                  |                 |                |                          |             |                 |           | Exclusivity      |
|                                    |                  |                 |                |                          |             |                 |           | Surcharge        |
|                                    |                  |                 |                |                          |             |                 |           | for              |
|                                    |                  |                 |                |                          |             |                 |           | Partially        |
|                                    |                  | -               |                |                          |             |                 |           | Distant          |
|                                    |                  | -               |                |                          |             |                 |           | Stations         |
|                                    |                  | -               |                |                          |             |                 |           |                  |
|                                    |                  | <b> </b>        |                |                          |             | H               |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
| Total DSEs                         |                  |                 | 0.00           | Total DSEs               |             |                 | 0.00      |                  |
| Gross Receipts First Group \$ 0.00 |                  |                 | 0.00           | Gross Receipts Secon     |             |                 |           |                  |
| Oross receipts r irst              | Огоир            | 4               | 0.00           | Cross Receipts decon     | id Group    | \$              | 0.00      |                  |
|                                    | _                |                 |                |                          |             |                 |           |                  |
| Base Rate Fee First                | Group            | \$              | 0.00           | Base Rate Fee Secon      | d Group     | \$              | 0.00      |                  |
|                                    | FIFTY-FIRST      | SUBSCRIBER GRO  | DUP            | FIFT                     | Y-SECOND    | SUBSCRIBER GROU | JP        |                  |
| COMMUNITY/ AREA                    | A                |                 | 0              | COMMUNITY/ AREA          |             |                 | 0         |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
| CALL SIGN                          | DSE              | CALL SIGN       | DSE            | CALL SIGN                | DSE         | CALL SIGN       | DSE       |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  | <u> </u>        |                |                          |             |                 |           |                  |
|                                    |                  | -               |                |                          | <del></del> |                 |           |                  |
|                                    |                  | <b> </b>        |                |                          | ····        |                 |           |                  |
|                                    |                  |                 |                |                          | ····        |                 |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  | +               |                | -                        |             |                 |           |                  |
|                                    |                  | <b> </b>        |                | -                        |             |                 |           |                  |
| Total DSEs                         |                  | П               | 0.00           | Total DSEs               |             | 11              | 0.00      |                  |
|                                    |                  |                 |                |                          |             |                 | •         |                  |
| Gross Receipts Third               | d Group          | \$              | 0.00           | Gross Receipts Fourth    | Group       | \$              | 0.00      |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
| Base Rate Fee Third                | d Group          | \$              | 0.00           | Base Rate Fee Fourth     | Group       | \$              | 0.00      |                  |
|                                    |                  | •               |                |                          |             |                 |           |                  |
|                                    |                  |                 |                |                          |             |                 |           |                  |
|                                    |                  |                 | criber group a | as shown in the boxes at | oove.       |                 |           |                  |
| Enter here and in blo              | ock 3, line 1, s | pace L (page 7) |                |                          |             | \$              |           |                  |

| LEGAL NAME OF OWN                  |              |                      |                |                          |            | -               | SYSTEM ID# | Name             |
|------------------------------------|--------------|----------------------|----------------|--------------------------|------------|-----------------|------------|------------------|
| Nortex Commun                      | ications C   | U.                   |                |                          |            |                 | 5984       |                  |
|                                    |              |                      |                | ATE FEES FOR EACH        |            |                 |            |                  |
|                                    |              | SUBSCRIBER GRO       |                | <del>II</del>            | Y-FOURTH   | SUBSCRIBER GROU |            | 9                |
| COMMUNITY/ AREA                    |              |                      | 0              | COMMUNITY/ AREA          |            |                 | 0          | Computation      |
| CALL SIGN                          | DSE          | CALL SIGN            | DSE            | CALL SIGN                | DSE        | CALL SIGN       | DSE        | of               |
| OF ILL CICIT                       | BOL          | O/ LEE GIGIT         | 502            | O/ LEE OIOIV             | 562        | O'ALL SIGIY     | 502        | Base Rate Fe     |
|                                    |              |                      |                |                          |            |                 |            | and              |
|                                    |              |                      |                |                          |            |                 |            | Syndicated       |
|                                    |              |                      |                |                          |            |                 |            | Exclusivity      |
|                                    |              |                      |                |                          |            |                 |            | Surcharge        |
|                                    |              |                      |                |                          |            |                 |            | for<br>Partially |
|                                    |              |                      |                |                          |            |                 |            | Distant          |
|                                    |              |                      |                |                          | ····       |                 |            | Stations         |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              | <b> </b>             |                | -                        |            |                 |            |                  |
|                                    |              | Щ                    | 0.00           |                          |            | 1               | 0.00       |                  |
| Total DSEs                         |              |                      | 0.00           | Total DSEs               |            | -               | 0.00       |                  |
| Gross Receipts First Group \$ 0.00 |              |                      | 0.00           | Gross Receipts Secor     | nd Group   | \$              | 0.00       |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
| Base Rate Fee First                | Group        | \$                   | 0.00           | Base Rate Fee Secon      | nd Group   | \$              | 0.00       |                  |
|                                    | FIFTY-FIFTH  | SUBSCRIBER GRO       | DUP            | F                        | IFTY-SIXTH | SUBSCRIBER GROU | JP         |                  |
| COMMUNITY/ AREA                    |              |                      | 0              | COMMUNITY/ AREA          |            |                 | 0          |                  |
| CALL SIGN                          | DSE          | CALL SIGN            | DSE            | CALL SIGN                | DSE        | CALL SIGN       | DSE        |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          | ····       |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                | -                        |            |                 |            |                  |
|                                    |              | H                    |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
|                                    |              |                      |                |                          |            |                 |            |                  |
| Total DSEs                         |              |                      | 0.00           | Total DSEs               |            |                 | 0.00       |                  |
| Gross Receipts Third               | Group        | \$                   | 0.00           | Gross Receipts Fourth    | n Group    | \$              | 0.00       |                  |
| Cross Necelbis IIIIIa              | Отоир        | \$                   | 0.00           | O1033 Neceibis Logiti    | , Group    | <del>y</del>    | 0.00       |                  |
| Base Rate Fee Third                | Group        | e                    | 0.00           | Base Rate Fee Fourth     | Group      | e               | 0.00       |                  |
| Dase Nate Fee HIIIU                | Gloup        | \$                   | 0.00           | Dase Nate Fee Fourti     | Gloup      | \$              | 0.00       |                  |
|                                    |              |                      |                | Ш                        |            |                 |            |                  |
| Base Rate Fee: Add                 | the base rat | e fees for each subs | criber group a | as shown in the boxes al | bove.      |                 |            |                  |
| Enter here and in blo              |              |                      | <b>5</b> 1     |                          |            | \$              |            |                  |

| LEGAL NAME OF OW                            |             |                |                |                         |           |                 | SYSTEM ID# | Name                |
|---|-------------|----------------|----------------|-------------------------|-----------|-----------------|------------|---------------------|
| Nortex Commur                               | ications C  | O.             |                |                         |           |                 | 5984       |                     |
|   |             |                |                | ATE FEES FOR EACH       |           |                 |            |                     |
|   |             | SUBSCRIBER GRO |                | ii e                    | TY-EIGHTH | SUBSCRIBER GROU |            | 9                   |
| COMMUNITY/ AREA                             |             |                | 0              | COMMUNITY/ AREA         |           |                 | 0          | Computation         |
| CALL SIGN                                   | DSE         | CALL SIGN      | DSE            | CALL SIGN               | DSE       | CALL SIGN       | DSE        | of                  |
| OALL GIGIN                                  | DOL         | OALL SIGN      | DOL            | GALL GIGIN              | DOL       | CALL SIGIV      | DOL        | Base Rate Fee       |
|   |             |                |                |                         |           |                 |            | and                 |
|   |             |                |                |                         |           |                 |            | Syndicated          |
|   |             |                |                |                         |           |                 |            | Exclusivity         |
|   |             |                |                |                         |           |                 |            | Surcharge           |
|   |             |                |                |                         |           |                 |            | for                 |
|   |             |                |                |                         |           |                 |            | Partially           |
|   |             |                |                |                         |           |                 |            | Distant<br>Stations |
|   |             | -              |                |                         |           |                 |            | Stations            |
|   |             | <b> </b>       |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
| Total DSEs                                  |             |                | 0.00           | Total DSEs              |           |                 | 0.00       |                     |
| Gross Receipts First Group \$ 0.00          |             |                | 0.00           | Gross Receipts Seco     |           |                 |            |                     |
| ·   | ·           |                |                |                         |           | \$              | 0.00       |                     |
| Base Rate Fee First                         | Group       | e e            | 0.00           | Base Rate Fee Secon     | nd Group  |                 | 0.00       |                     |
| Dase Nate Fee First                         | Огоир       | \$             | 0.00           | Buse Rule Fee Occor     | іч Огоцр  | \$              | 0.00       |                     |
| J   | FIFTY-NINTH | SUBSCRIBER GRO | DUP            |                         | SIXTIETH  | SUBSCRIBER GROU | JP         |                     |
| COMMUNITY/ AREA                             |             |                | 0              | COMMUNITY/ AREA         |           |                 | 0          |                     |
|   |             |                | ······         |                         |           | TI              |            |                     |
| CALL SIGN                                   | DSE         | CALL SIGN      | DSE            | CALL SIGN               | DSE       | CALL SIGN       | DSE        |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             | -              |                |                         |           |                 |            |                     |
|   |             |                |                |                         | ····      |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             | -              |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           | H               |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
|   |             |                |                |                         |           |                 |            |                     |
| Total DSEs                                  |             |                | 0.00           | Total DSEs              |           |                 | 0.00       |                     |
| Cross Bossints Thir                         | d Croup     | e              | 0.00           | Cross Bossints Fourt    | h Croup   | •               | 0.00       |                     |
| Gross Receipts Third                        | а Этоир     | \$             | 0.00           | Gross Receipts Fourt    | ii Gioup  | \$              | 0.00       |                     |
|   |             |                | ]              |                         |           |                 |            |                     |
| Base Rate Fee Third                         | d Group     | \$             | 0.00           | Base Rate Fee Fourt     | h Group   | \$              | 0.00       |                     |
|   |             |                |                | <u>II</u>               |           |                 |            |                     |
| B B   |             |                |                |                         |           |                 |            |                     |
| Base Rate Fee: Add<br>Enter here and in blo |             |                | criber group a | as shown in the boxes a | pove.     | s               |            |                     |
|   |             | (Fago 1)       |                |                         |           | *               |            |                     |

| LEGAL NAME OF OWNER Nortex Communica           |           |                 |              |                                |          | S                | YSTEM ID# | Name                 |
|--|-----------|-----------------|--------------|--------------------------------|----------|------------------|-----------|----------------------|
| Nortex Communica                               | ilions Co | j.              |              |                                |          |                  | 5984      |                      |
|  |           |                 |              | TE FEES FOR EACH               |          |                  |           |                      |
| COMMUNITY/ AREA                                | TY-FIRST  | SUBSCRIBER GROU | <b>0</b>     | COMMUNITY/ AREA                | 7-SECOND | SUBSCRIBER GROUI | 0         | 9                    |
|  |           |                 |              |                                |          |                  |           | Computation          |
| CALL SIGN                                      | DSE       | CALL SIGN       | DSE          | CALL SIGN                      | DSE      | CALL SIGN        | DSE       | of                   |
|  |           |                 |              |                                |          |                  |           | Base Rate Fee<br>and |
|  |           |                 |              |                                |          | H                |           | Syndicated           |
|  |           |                 |              |                                |          |                  |           | Exclusivity          |
|  |           |                 |              |                                |          |                  |           | Surcharge            |
|  |           |                 |              |                                |          | H                |           | for                  |
|  |           |                 |              |                                |          |                  | ···       | Partially            |
|  |           |                 |              |                                |          |                  |           | Distant              |
|  |           |                 |              |                                |          |                  |           | Stations             |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
| Total DSEs                                     |           |                 | 0.00         | Total DSEs                     |          |                  | 0.00      |                      |
| Gross Receipts First Gro                       | oup       | \$              | 0.00         | Gross Receipts Second          | d Group  | \$               | 0.00      |                      |
| Base Rate Fee First Gro                        | oup       | \$              | 0.00         | Base Rate Fee Second           | d Group  | \$               | 0.00      |                      |
| SIX  | ry-third  | SUBSCRIBER GROU | JP           | SIXT                           | Y-FOURTH | SUBSCRIBER GROUI | •         |                      |
| COMMUNITY/ AREA                                |           |                 | 0            | COMMUNITY/ AREA                |          |                  | 0         |                      |
| CALL SIGN                                      | DSE       | CALL SIGN       | DSE          | CALL SIGN                      | DSE      | CALL SIGN        | DSE       |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          | -                |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 |              |                                |          |                  | ···       |                      |
|  |           |                 |              |                                | <b>_</b> |                  | <u> </u>  |                      |
|  |           |                 |              |                                |          |                  |           |                      |
|  |           |                 | •            |                                |          |                  |           |                      |
| Total DSEs                                     | -         |                 | 0.00         | Total DSEs                     | •        |                  | 0.00      |                      |
| Gross Receipts Third Gr                        | oup       | \$              | 0.00         | Gross Receipts Fourth          | Group    | \$               | 0.00      |                      |
| Base Rate Fee Third Gr                         | oup       | \$              | 0.00         | Base Rate Fee Fourth           | Group    | \$               | 0.00      |                      |
| Base Rate Fee: Add the Enter here and in block |           |                 | iber group a | II<br>as shown in the boxes ab | ove.     | \$               |           |                      |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |          |                |                |                             |                                     |                |          |                  |  |  |
|---|----------|----------------|----------------|-----------------------------|-------------------------------------|----------------|----------|------------------|--|--|
|   | BLOCK A: | COMPUTATION (  | OF BASE RA     | TE FEES FOR EAC             | CH SUBSCR                           | IBER GROUP     |          |                  |  |  |
|   |          | SUBSCRIBER GRO |                |                             |                                     | SUBSCRIBER GRO |          | 9                |  |  |
| COMMUNITY/ AREA   |          |                | 0              | COMMUNITY/ ARE              | Α                                   |                | 0        | Computation      |  |  |
| CALL SIGN   | DSE      | CALL SIGN      | DSE            | CALL SIGN                   | DSE                                 | CALL SIGN      | DSE      | of               |  |  |
|   |          |                |                |                             |                                     |                |          | Base Rate F      |  |  |
|   |          |                |                |                             |                                     |                |          | and              |  |  |
|   |          |                |                |                             |                                     |                |          | Syndicated       |  |  |
|   |          |                |                |                             |                                     |                |          | Exclusivity      |  |  |
|   |          |                |                |                             |                                     |                |          | Surcharge<br>for |  |  |
|   |          |                |                |                             |                                     |                |          | Partially        |  |  |
|   |          |                |                |                             |                                     |                |          | Distant          |  |  |
|   |          |                |                |                             |                                     |                |          | Stations         |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          | <u> </u>       |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
| Total DSEs  |          |                | 0.00           | Total DSEs                  |                                     |                | 0.00     |                  |  |  |
| Gross Receipts First Group \$ 0.00  |          |                | 0.00           | Gross Receipts Sec          | Gross Receipts Second Group \$ 0.00 |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
| Base Rate Fee First   |          | \$             | 0.00           | Base Rate Fee Sec           |                                     | \$             | 0.00     |                  |  |  |
|   |          | SUBSCRIBER GRO |                |                             |                                     | SUBSCRIBER GRO | _        |                  |  |  |
| COMMUNITY/ AREA   |          |                | 0              | COMMUNITY/ ARE              | Α                                   |                | 0        |                  |  |  |
| CALL SIGN   | DSE      | CALL SIGN      | DSE            | CALL SIGN                   | DSE                                 | CALL SIGN      |          |                  |  |  |
| OALL SIGIV  | 562      | O/ LEE GIGIT   | 552            | O/ LEE GIGIT                | 502                                 | O/ LEE STOTA   | DSE      |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          | -              |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
|   |          | 1              |                |                             |                                     |                |          |                  |  |  |
|   |          |                |                |                             |                                     |                |          |                  |  |  |
| Γotal DSEs  |          |                | 0.00           | Total DSEs                  |                                     |                | 0.00     |                  |  |  |
| Gross Receipts Third  | Group    | \$             | 0.00           | Gross Receipts Fou          | rth Group                           | \$             | 0.00     |                  |  |  |
| o. coo recompo minu   | Стоир    | *              | <u> </u>       | C1000 1 Goeipto 1 Ou        | rai Gioup                           |                | <u> </u> |                  |  |  |
| Base Rate Fee Third   | Group    | \$             | 0.00           | Base Rate Fee Fou           | rth Group                           | \$             | 0.00     |                  |  |  |
| Base Rate Fee: Add<br>Enter here and in bloo                                      |          |                | criber group a | II<br>as shown in the boxes | above.                              |                |          |                  |  |  |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  SYSTEM ID# |                 |                 |              |                          |                                     |                 |      |                |  |  |
|--|-----------------|-----------------|--------------|--------------------------|-------------------------------------|-----------------|------|----------------|--|--|
| Nortex Commun                                    | ications C      | 0.              |              |                          |                                     |                 | 5984 | Name           |  |  |
|  |                 |                 |              | TE FEES FOR EACH         |                                     |                 |      |                |  |  |
|  |                 | SUBSCRIBER GRO  |              | TT .                     | EVENTIETH                           | SUBSCRIBER GROU |      | 9              |  |  |
| COMMUNITY/ AREA                                  | ١               |                 | 0            | COMMUNITY/ AREA          |                                     |                 | 0    |                |  |  |
| CALL SIGN  | DSE             | CALL SIGN       | DSE          | CALL SIGN                | DSE                                 | CALL SIGN       | DSE  | Computation of |  |  |
| CALL SIGN  | DSE             | CALL SIGN       | DSE          | CALL SIGN                | DSE                                 | CALL SIGN       | DOE  | Base Rate Fee  |  |  |
|  |                 |                 |              |                          |                                     |                 |      | and            |  |  |
|  |                 |                 |              |                          |                                     |                 |      | Syndicated     |  |  |
|  |                 |                 |              |                          |                                     |                 |      | Exclusivity    |  |  |
|  |                 |                 |              |                          |                                     |                 |      | Surcharge      |  |  |
|  |                 |                 |              |                          |                                     |                 |      | for            |  |  |
|  |                 |                 |              |                          |                                     |                 |      | Partially      |  |  |
|  |                 |                 |              |                          |                                     |                 |      | Distant        |  |  |
|  |                 | H               |              |                          |                                     |                 |      | Stations       |  |  |
|  |                 |                 |              |                          | ···                                 |                 |      |                |  |  |
|  |                 | <b> </b>        |              |                          | •                                   | H               |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
| Total DSEs                                       |                 |                 | 0.00         | Total DSEs               |                                     |                 | 0.00 |                |  |  |
| Gross Receipts First Group \$ 0.00               |                 |                 | 0.00         | Gross Receipts Secon     | Gross Receipts Second Group \$ 0.00 |                 |      |                |  |  |
| •  |                 | -               |              |                          | ,                                   | -               |      |                |  |  |
| Base Rate Fee First                              | Croup           |                 | 0.00         | Base Rate Fee Secon      | d Croup                             |                 | 0.00 |                |  |  |
| Dase Rate Fee First                              | Group           | \$              | 0.00         | base Rate Fee Secon      | ia Group                            | \$              | 0.00 |                |  |  |
| SEV  | ENTY-FIRST      | SUBSCRIBER GRO  | DUP          | SEVENT                   | Y-SECOND                            | SUBSCRIBER GROU | JP   |                |  |  |
| COMMUNITY/ AREA                                  | ١               |                 | 0            | COMMUNITY/ AREA          |                                     |                 | 0    |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
| CALL SIGN  | DSE             | CALL SIGN       | DSE          | CALL SIGN                | DSE                                 | CALL SIGN       | DSE  |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 | H               |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 | <b> </b>        |              |                          | ···                                 |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              | -                        |                                     | -               |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 | <b> </b>        |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
| Total DSEs                                       |                 |                 | 0.00         | Total DSEs               |                                     |                 | 0.00 |                |  |  |
|  |                 |                 |              |                          |                                     |                 | _    |                |  |  |
| Gross Receipts Third                             | Group           | \$              | 0.00         | Gross Receipts Fourth    | Group                               | \$              | 0.00 |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
| Base Rate Fee Third                              | d Group         | \$              | 0.00         | Base Rate Fee Fourth     | Group                               | \$              | 0.00 |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 |              |                          |                                     |                 |      |                |  |  |
|  |                 |                 | criber group | as shown in the boxes at | oove.                               | e               |      |                |  |  |
| Enter here and in blo                            | юк э, IIПе 1, S | pace ∟ (page /) |              |                          |                                     | <b>3</b>        |      |                |  |  |

| LEGAL NAME OF OWNER Nortex Communica           |          |                     |              |                                |           | SY                    | STEM ID#<br>5984 | Name                     |
|--|----------|---------------------|--------------|--------------------------------|-----------|-----------------------|------------------|--------------------------|
|  |          |                     | BASE DA      | TE FEES FOR EACH               | SI IBSOBI | RED CROLID            | 3304             |                          |
|  |          | SUBSCRIBER GROU     |              | III                            |           | SUBSCRIBER GROUP      | )                |                          |
| COMMUNITY/ AREA                                |          |                     | 0            | COMMUNITY/ AREA                |           |                       | 0                | 9<br>Computation         |
| CALL SIGN                                      | DSE      | CALL SIGN           | DSE          | CALL SIGN                      | DSE       | CALL SIGN             | DSE              | of                       |
|  |          |                     |              |                                |           |                       |                  | Base Rate Fee            |
|  |          |                     |              |                                |           | -                     |                  | and                      |
|  |          |                     |              |                                |           |                       |                  | Syndicated               |
|  |          |                     |              |                                |           |                       |                  | Exclusivity<br>Surcharge |
|  |          |                     |              |                                |           |                       |                  | for                      |
|  |          |                     |              |                                |           | =                     |                  | Partially                |
|  |          |                     |              |                                |           |                       |                  | Distant                  |
|  |          |                     |              |                                |           | _                     |                  | Stations                 |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       | ···              |                          |
| Total DSEs                                     | -        |                     | 0.00         | Total DSEs                     |           |                       | 0.00             |                          |
| Gross Receipts First Gro                       | oup      | \$                  | 0.00         | Gross Receipts Second          | d Group   | \$                    | 0.00             |                          |
| Base Bate Fee First Cr                         |          |                     | 0.00         | Base Bate Fee Conne            | d Craun   |                       | 0.00             |                          |
| Base Rate Fee First Gro                        |          | \$ CLIBSCRIPER CROL | 0.00         | Base Rate Fee Second           |           | \$ CLIBECDIRED CROULE | 0.00             |                          |
| COMMUNITY/ AREA                                | IY-FIFIH | SUBSCRIBER GROU     | 0            | COMMUNITY/ AREA                | NIY-SIXIH | SUBSCRIBER GROUP      | 0                |                          |
| COMMONTI I/ AREA                               |          |                     |              | COMMONT TO AREA                |           |                       |                  |                          |
| CALL SIGN                                      | DSE      | CALL SIGN           | DSE          | CALL SIGN                      | DSE       | CALL SIGN             | DSE              |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
|  |          |                     |              |                                |           |                       |                  |                          |
| Total DSEs                                     |          |                     | 0.00         | Total DSEs                     |           |                       | 0.00             |                          |
| Gross Receipts Third Gr                        | oup      | \$                  | 0.00         | Gross Receipts Fourth          | Group     | \$                    | 0.00             |                          |
| Base Rate Fee Third Gr                         | oup      | \$                  | 0.00         | Base Rate Fee Fourth           | Group     | \$                    | 0.00             |                          |
| Base Rate Fee: Add the Enter here and in block |          |                     | iber group a | II<br>as shown in the boxes ab | ove.      | \$                    |                  |                          |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |       |                |                |                       |           |                              |      |                   |
|---|-------|----------------|----------------|-----------------------|-----------|------------------------------|------|-------------------|
| QE\/ENIT  |       | COMPUTATION C  |                | ATE FEES FOR EAC      |           | BER GROUP<br>SUBSCRIBER GROU | ID   |                   |
| COMMUNITY/ AREA   |       | 30B3GNBEN GNC  | 0              | COMMUNITY/ ARE        |           | 30B3CKBEK GKOC               | 0    | 9                 |
| CALL SIGN   | DSE   | CALL SIGN      | DSE            | CALL SIGN             | DSE       | CALL SIGN                    | DSE  | Computation of    |
|   |       |                |                |                       |           |                              |      | Base Rate Fee     |
|   |       |                |                |                       |           | -                            |      | and<br>Syndicated |
|   |       |                |                |                       |           |                              |      | Exclusivity       |
|   |       |                |                |                       |           |                              |      | Surcharge<br>for  |
|   |       |                | ····           |                       |           |                              |      | Partially         |
|   |       |                |                |                       |           |                              |      | Distant           |
|   |       |                |                |                       |           |                              |      | Stations          |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
| Total DSEs  |       | -              | 0.00           | Total DSEs            |           |                              | 0.00 |                   |
| Gross Receipts First  | Group | \$             | 0.00           | Gross Receipts Sec    | ond Group | \$                           | 0.00 |                   |
| Base Rate Fee First   | Group | \$             | 0.00           | Base Rate Fee Sec     | ond Group | \$                           | 0.00 |                   |
|   |       | SUBSCRIBER GRO |                |                       |           | SUBSCRIBER GROU              | _    |                   |
| COMMUNITY/ AREA   |       |                | 0              | COMMUNITY/ ARE        | Α         |                              | 0    |                   |
| CALL SIGN   | DSE   | CALL SIGN      | DSE            | CALL SIGN             | DSE       | CALL SIGN                    | DSE  |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
|   |       |                |                |                       |           |                              |      |                   |
| Total DSEs  |       | -              | 0.00           | Total DSEs            |           | -                            | 0.00 |                   |
| Gross Receipts Third  | Group | \$             | 0.00           | Gross Receipts Fou    | rth Group | \$                           | 0.00 |                   |
| Base Rate Fee Third   | Group | \$             | 0.00           | Base Rate Fee Fou     | rth Group | \$                           | 0.00 |                   |
| <b>Base Rate Fee:</b> Add<br>Enter here and in bloo                               |       |                | criber group a | as shown in the boxes | above.    | \$                           |      |                   |

| LEGAL NAME OF OWN                  |                 |                 |                |                         |                                     |                 | SYSTEM ID# | Name           |  |  |
|------------------------------------|-----------------|-----------------|----------------|-------------------------|-------------------------------------|-----------------|------------|----------------|--|--|
| Nortex Commun                      | ications C      | 0.              |                |                         |                                     |                 | 5984       |                |  |  |
|                                    |                 |                 |                | TE FEES FOR EACH        |                                     |                 |            |                |  |  |
|                                    |                 | SUBSCRIBER GRO  |                | ii e                    |                                     | SUBSCRIBER GROU |            | 9              |  |  |
| COMMUNITY/ AREA                    |                 |                 | 0              | COMMUNITY/ AREA         |                                     |                 | 0          |                |  |  |
| CALL SIGN                          | DSE             | CALL SIGN       | DSE            | CALL SIGN               | DSE                                 | CALL SIGN       | DSE        | Computation of |  |  |
| CALL SIGN                          | DSE             | CALL SIGN       | DSE            | CALL SIGN               | DSE                                 | CALL SIGN       | DOE        | Base Rate Fee  |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            | and            |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            | Syndicated     |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            | Exclusivity    |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            | Surcharge      |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            | for            |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            | Partially      |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            | Distant        |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            | Stations       |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 | <b> </b>        |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
| Total DSEs                         |                 |                 | 0.00           | Total DSEs              |                                     |                 | 0.00       |                |  |  |
| Gross Receipts First Group \$ 0.00 |                 |                 | 0.00           | Gross Receipts Secon    | Gross Receipts Second Group \$ 0.00 |                 |            |                |  |  |
| ·                                  | ·               |                 |                |                         |                                     |                 |            |                |  |  |
| Base Rate Fee First                | Group           | \$              | 0.00           | Base Rate Fee Secon     | nd Group                            | \$              | 0.00       |                |  |  |
|                                    |                 |                 | -              |                         |                                     |                 |            |                |  |  |
|                                    |                 | SUBSCRIBER GRO  |                | ii e                    | ry-fourth                           | SUBSCRIBER GROU | _          |                |  |  |
| COMMUNITY/ AREA                    |                 |                 | 0              | COMMUNITY/ AREA         |                                     |                 | 0          |                |  |  |
| CALL SIGN                          | DSE             | CALL SIGN       | DSE            | CALL SIGN               | DSE                                 | CALL SIGN       | DSE        |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 | <b></b>         |                |                         |                                     |                 |            |                |  |  |
|                                    |                 | H               |                |                         |                                     |                 |            |                |  |  |
|                                    |                 | <u> </u>        |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
| Total DSEs                         |                 |                 | 0.00           | Total DSEs              |                                     |                 | 0.00       |                |  |  |
| Gross Receipts Third               | Group           | \$              | 0.00           | Gross Receipts Fourtl   | h Group                             | \$              | 0.00       |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
| Base Rate Fee Third                | Group           | \$              | 0.00           | Base Rate Fee Fourth    | h Group                             | \$              | 0.00       |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 |                |                         |                                     |                 |            |                |  |  |
|                                    |                 |                 | criber group a | as shown in the boxes a | bove.                               |                 |            |                |  |  |
| Enter here and in blo              | ck 3, line 1, s | pace L (page 7) |                |                         |                                     | \$              |            |                |  |  |

| LEGAL NAME OF OWN      |                 |  |                |                                     |   |                 | SYSTEM ID#  | Name           |
|------------------------|-----------------|--|----------------|-------------------------------------|---|-----------------|-------------|----------------|
| Nortex Commun          | cations C       | 0.   |                |                                     |   |                 | 5984        | Name           |
|                        | BLOCK A:        | COMPUTATION C                                | OF BASE RA     | ATE FEES FOR EACH                   | SUBSCR                                  | IBER GROUP      |             |                |
| EIG                    | GHTY-FIFTH      | SUBSCRIBER GRO                               | DUP            | EIG                                 | SHTY-SIXTH                              | SUBSCRIBER GROU | UP          | 0              |
| COMMUNITY/ AREA        |                 |  | 0              | COMMUNITY/ AREA                     |   |                 | 0           | 9              |
| CALL SIGN              | DSE             | CALL SIGN                                    | DSE            | CALL SIGN                           | DSE                                     | CALL SIGN       | DSE         | Computation of |
| CALL SIGN              | DSE             | CALL SIGN                                    | DSE            | CALL SIGN                           | DSE                                     | CALL SIGN       | DSE         | Base Rate Fee  |
|                        |                 | <b> </b>                                     |                |                                     | ····                                    |                 |             | and            |
|                        |                 |  |                |                                     |   |                 |             | Syndicated     |
|                        |                 |  |                |                                     |   |                 |             | Exclusivity    |
|                        |                 |  |                |                                     |   |                 |             | Surcharge      |
|                        |                 |  |                |                                     |   |                 |             | for            |
|                        |                 |  |                |                                     |   |                 |             | Partially      |
|                        |                 |  |                |                                     |   |                 |             | Distant        |
|                        |                 |  |                |                                     |   |                 |             | Stations       |
|                        |                 | -  |                |                                     | ····                                    |                 |             |                |
|                        |                 | <b> </b>                                     |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
| Total DSEs             |                 |  | 0.00           | Total DSEs                          |   |                 | 0.00        |                |
| Gross Receipts First   | Group           | \$   | 0.00           | Gross Receipts Second Group \$ 0.00 |   |                 |             |                |
|                        | -               |  |                |                                     |   |                 |             |                |
| Base Rate Fee First    | Group           | \$   | 0.00           | Base Rate Fee Secon                 | nd Group                                | \$              | 0.00        |                |
| Baco rato r co r mot   |                 | Ψ  | 0.00           | Buod Rato 1 00 cocon                | та Отоар                                | <u> </u>        | 0.00        |                |
| EIGHT                  | Y-SEVENTH       | SUBSCRIBER GRO                               | DUP            | EIGH                                | ITY-EIGHTH                              | SUBSCRIBER GROU | UP          |                |
| COMMUNITY/ AREA        |                 |  | 0              | COMMUNITY/ AREA                     | *************************************** |                 | 0           |                |
| CALL SIGN              | DSE             | CALL SIGN                                    | DSE            | CALL SIGN                           | DSE                                     | CALL SIGN       | DSE         |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 | -  |                |                                     |   |                 |             |                |
|                        | •••••           | <b> </b>                                     |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  | • • •          |                                     |   |                 | •           |                |
| Total DSEs             |                 |  | 0.00           | Total DSEs                          |   |                 | 0.00        |                |
| Gross Receipts Third   | Group           | \$   | 0.00           | Gross Receipts Fourth               | h Group                                 | \$              | 0.00        |                |
|                        |                 |  |                |                                     |   |                 | $\neg \neg$ |                |
| Base Rate Fee Third    | Group           | \$   | 0.00           | Base Rate Fee Fourth                | h Group                                 | \$              | 0.00        |                |
|                        | <u> </u>        | <u>.                                    </u> |                |                                     |   |                 |             |                |
|                        |                 |  |                |                                     |   |                 |             |                |
|                        |                 |  | criber group a | as shown in the boxes a             | bove.                                   |                 |             |                |
| Enter here and in bloo | ck 3, line 1, s | pace L (page 7)                              |                |                                     |   | \$              |             |                |

| LEGAL NAME OF OWN      |                    |                      |                |                          |                | <u></u>           | SYSTEM ID# | Name           |
|------------------------|--------------------|----------------------|----------------|--------------------------|----------------|-------------------|------------|----------------|
| Nortex Communi         | cations C          | 0.                   |                |                          |                |                   | 5984       | Hante          |
|                        | BLOCK A:           | COMPUTATION C        | F BASE RA      | ATE FEES FOR EACH        | SUBSCR         | BER GROUP         |            |                |
| EIG                    | HTY-NINTH          | SUBSCRIBER GRO       | UP             |                          | NINTIETH       | SUBSCRIBER GROU   | JP         | ^              |
| COMMUNITY/ AREA        |                    |                      | 0              | COMMUNITY/ AREA          |                |                   | 0          | 9              |
| CALL SIGN              | Dee                | CALL SIGN            | Dee            | CALL SIGN                | Dee            | CALL SIGN         | Dee        | Computation of |
| CALL SIGN              | DSE                | CALL SIGN            | DSE            | CALL SIGN                | DSE            | CALL SIGN         | DSE        | Base Rate Fee  |
|                        |                    |                      |                |                          | <u> </u>       | -                 |            | and            |
|                        |                    |                      |                |                          | <del></del>    | <del></del>       |            | Syndicated     |
|                        |                    |                      |                |                          |                |                   |            | Exclusivity    |
|                        |                    |                      |                |                          |                |                   |            | Surcharge      |
|                        |                    |                      |                |                          |                |                   |            | for            |
|                        |                    |                      |                |                          |                |                   |            | Partially      |
|                        |                    |                      |                |                          |                |                   |            | Distant        |
|                        |                    |                      |                |                          |                |                   |            | Stations       |
|                        |                    |                      |                |                          |                |                   |            |                |
|                        |                    |                      |                |                          | <u>.</u>       |                   |            |                |
|                        |                    |                      |                | -                        | <del>.  </del> | -                 |            |                |
|                        |                    |                      |                | -                        | <del>-</del>   |                   |            |                |
|                        |                    |                      | ····           |                          | ···            |                   |            |                |
| Total DSEs             |                    | <u>  </u>            | 0.00           | Total DSEs               |                | <b>!</b> !        | 0.00       |                |
| Gross Receipts First 0 | Proup              | \$                   | 0.00           | Gross Receipts Secon     | d Group        | \$                | 0.00       |                |
| Cross Receipts First C | лоцр               | <del>-</del>         | 0.00           | Cross receipts decon     | a Group        | Ψ                 | 0.00       |                |
| Base Rate Fee First 0  | Group              | \$                   | 0.00           | Base Rate Fee Secon      | d Group        | \$                | 0.00       |                |
| NIN                    | IETY-FIRST         | SUBSCRIBER GRO       | UP             | NINET'                   | Y-SECOND       | SUBSCRIBER GROU   | JP         |                |
| COMMUNITY/ AREA        |                    | COBCOTTIBLIT OF TO   | 0              | COMMUNITY/ AREA          | 1 0200112      | COBCONDENCE ON CO | 0          |                |
| OOMMONT IT TAKEN       |                    |                      |                | COMMONT IT TO THE        |                |                   |            |                |
| CALL SIGN              | DSE                | CALL SIGN            | DSE            | CALL SIGN                | DSE            | CALL SIGN         | DSE        |                |
|                        |                    |                      |                |                          |                |                   |            |                |
|                        |                    |                      |                |                          |                |                   |            |                |
|                        |                    |                      |                |                          |                |                   |            |                |
|                        |                    |                      |                |                          |                |                   |            |                |
|                        |                    |                      |                |                          |                |                   |            |                |
|                        |                    |                      |                |                          |                | -                 |            |                |
|                        |                    |                      | ·····          |                          | <u></u>        | -                 |            |                |
|                        | •••••              |                      | ••••           |                          | <u> </u>       |                   |            |                |
|                        |                    |                      |                |                          | <u> </u>       | H                 |            |                |
|                        |                    |                      |                |                          |                |                   |            |                |
|                        |                    |                      |                |                          |                |                   |            |                |
|                        |                    |                      |                |                          |                |                   |            |                |
|                        |                    |                      |                |                          |                |                   |            |                |
| T                      |                    |                      | 0.00           | T                        |                |                   | 6.00       |                |
| Total DSEs             |                    | -                    | 0.00           | Total DSEs               |                |                   | 0.00       |                |
| Gross Receipts Third   | Group              | \$                   | 0.00           | Gross Receipts Fourth    | Group          | \$                | 0.00       |                |
|                        | _                  |                      |                |                          | _              |                   |            |                |
| Base Rate Fee Third    | Group              | \$                   | 0.00           | Base Rate Fee Fourth     | Group          | \$                | 0.00       |                |
|                        |                    |                      |                | Ш                        |                |                   |            |                |
| Base Rate Fee: Add t   | he <b>base rat</b> | e fees for each subs | criber group a | as shown in the boxes ab | oove.          |                   |            |                |
| Enter here and in bloc |                    |                      | ٠,             |                          |                | \$                |            |                |

| LEGAL NAME OF OWN     |              |                     |                |                          |           |                 | SYSTEM ID# | Name                |
|-----------------------|--------------|---------------------|----------------|--------------------------|-----------|-----------------|------------|---------------------|
| Nortex Commun         | ications C   | 0.                  |                |                          |           |                 | 5984       | 110.110             |
|                       |              |                     |                | TE FEES FOR EACH         |           |                 |            |                     |
|                       |              | SUBSCRIBER GRO      |                | ll .                     | Y-FOURTH  | SUBSCRIBER GROU |            | 9                   |
| COMMUNITY/ AREA       |              |                     | 0              | COMMUNITY/ AREA          |           |                 | 0          |                     |
| CALL SIGN             | DSE          | CALL SIGN           | DSE            | CALL SIGN                | DSE       | CALL SIGN       | DSE        | Computation of      |
| CALL SIGN             | DSE          | CALL SIGN           | DSE            | CALL SIGN                | DSE       | CALL SIGN       | DOE        | Base Rate Fe        |
|                       |              |                     |                |                          |           |                 |            | and                 |
|                       |              |                     |                |                          |           |                 |            | Syndicated          |
|                       |              |                     |                |                          |           |                 |            | Exclusivity         |
|                       |              |                     |                |                          |           |                 |            | Surcharge           |
|                       |              |                     |                |                          |           |                 |            | for                 |
|                       |              |                     |                |                          |           |                 |            | Partially           |
|                       |              | -                   |                |                          | <u></u>   |                 |            | Distant<br>Stations |
|                       |              |                     |                |                          | <u></u>   |                 |            | Stations            |
|                       |              | <b> </b>            |                |                          | <u>-</u>  | H               |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
| Total DSEs            |              |                     | 0.00           | Total DSEs               |           |                 | 0.00       |                     |
| Gross Receipts First  | Group        | \$                  | 0.00           | Gross Receipts Secon     | d Group   | \$              | 0.00       |                     |
|                       | •            |                     |                |                          |           |                 |            |                     |
| Base Rate Fee First   | Group        | ¢                   | 0.00           | Base Rate Fee Secon      | d Group   | e               | 0.00       |                     |
| Buse Rate Fee First   | Огоир        | \$                  | 0.00           | Buse Nate 1 ce occorr    | а отоар   | \$              | 0.00       |                     |
| NI                    | NETY-FIFTH   | SUBSCRIBER GRO      | DUP            | NIN                      | ETY-SIXTH | SUBSCRIBER GROU | JP         |                     |
| COMMUNITY/ AREA       |              |                     | 0              | COMMUNITY/ AREA          |           |                 | 0          |                     |
|                       | T            | II                  | T              |                          | T = = =   | II              |            |                     |
| CALL SIGN             | DSE          | CALL SIGN           | DSE            | CALL SIGN                | DSE       | CALL SIGN       | DSE        |                     |
|                       |              | <b>-</b>            |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          | <u></u>   |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                | -                        |           |                 |            |                     |
|                       |              |                     |                |                          |           | H               |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
|                       |              |                     |                |                          |           |                 |            |                     |
| Total DSEs            |              |                     | 0.00           | Total DSEs               |           |                 | 0.00       |                     |
| Gross Receipts Third  | I Group      | \$                  | 0.00           | Gross Receipts Fourth    | Group     | \$              | 0.00       |                     |
| 2.300                 | . 5.000      | *                   | 3.00           | Supple   Supple          | 3.55P     | <u>-</u>        |            |                     |
| _                     |              |                     |                |                          |           |                 |            |                     |
| Base Rate Fee Third   | I Group      | \$                  | 0.00           | Base Rate Fee Fourth     | Group     | \$              | 0.00       |                     |
|                       |              |                     |                | Ш                        |           |                 |            |                     |
| Page Pate Free A !!   | the been and | o food for and best | oribor ar-···  | an ahawa in the barrer   | 2010      |                 |            |                     |
| Enter here and in blo |              |                     | criber group a | as shown in the boxes at | ouve.     | \$              |            |                     |
|                       |              | ,                   |                |                          |           |                 |            |                     |

| LEGAL NAME OF OWN     |                 |                 |                |                         |             |                 | SYSTEM ID# | Name             |
|-----------------------|-----------------|-----------------|----------------|-------------------------|-------------|-----------------|------------|------------------|
| Nortex Commun         | ications C      | 0.              |                |                         |             |                 | 5984       | Hailie           |
|                       |                 |                 |                | TE FEES FOR EACH        | SUBSCR      | IBER GROUP      |            |                  |
|                       |                 | SUBSCRIBER GRO  |                | ii e                    | TY-EIGHT    | SUBSCRIBER GROU |            | ٥                |
| COMMUNITY/ AREA       |                 |                 | 0              | COMMUNITY/ AREA         |             |                 | 0          | 9<br>Computation |
| CALL SIGN             | DSE             | CALL SIGN       | DSE            | CALL SIGN               | DSE         | CALL SIGN       | DSE        | Computation of   |
| CALL SIGN             | DSE             | CALL SIGN       | DSE            | CALL SIGN               | DSE         | CALL SIGN       | DOE        | Base Rate Fee    |
|                       |                 |                 |                |                         |             |                 |            | and              |
|                       |                 |                 |                |                         |             |                 |            | Syndicated       |
|                       |                 |                 |                |                         |             |                 |            | Exclusivity      |
|                       |                 |                 |                |                         |             |                 |            | Surcharge        |
|                       |                 |                 |                |                         |             |                 |            | for              |
|                       |                 |                 |                |                         |             |                 |            | Partially        |
|                       |                 |                 |                |                         |             |                 |            | Distant          |
|                       |                 | -               |                |                         |             |                 |            | Stations         |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 | <b> </b>        |                |                         |             | H               |            |                  |
|                       |                 |                 |                |                         |             | -               |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
| Total DSEs            |                 |                 | 0.00           | Total DSEs              |             |                 | 0.00       |                  |
| Gross Receipts First  | Group           | \$              | 0.00           | Gross Receipts Secon    | nd Group    | \$              | 0.00       |                  |
| Cioss Receipts i list | Огоир           | Ψ               | 0.00           | Cross receipts decor    | ій Огойр    | <u>Ψ</u>        | 0.00       |                  |
|                       | _               |                 |                |                         |             |                 |            |                  |
| Base Rate Fee First   | Group           | \$              | 0.00           | Base Rate Fee Secon     | nd Group    | \$              | 0.00       |                  |
| NIN                   | NETY-NINTH      | SUBSCRIBER GRO  | DUP            | ONE HI                  | JNDREDTH    | SUBSCRIBER GROU | JP         |                  |
| COMMUNITY/ AREA       |                 |                 | 0              | COMMUNITY/ AREA         |             |                 | 0          |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
| CALL SIGN             | DSE             | CALL SIGN       | DSE            | CALL SIGN               | DSE         | CALL SIGN       | DSE        |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 | <b></b>         |                |                         | <del></del> |                 |            |                  |
|                       |                 | <b> </b>        |                |                         | ····        |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                | -                       |             |                 |            |                  |
|                       |                 | <b> </b>        |                | -                       |             |                 |            |                  |
| Total DSEs            |                 | Ш               | 0.00           | Total DSEs              |             | 11              | 0.00       |                  |
| Total DSES            |                 |                 |                | Total DSEs              |             |                 |            |                  |
| Gross Receipts Third  | Group           | \$              | 0.00           | Gross Receipts Fourth   | n Group     | \$              | 0.00       |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
| Base Rate Fee Third   | Group           | \$              | 0.00           | Base Rate Fee Fourth    | n Group     | \$              | 0.00       |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 |                |                         |             |                 |            |                  |
|                       |                 |                 | criber group a | as shown in the boxes a | bove.       |                 |            |                  |
| Enter here and in blo | ck 3, line 1, s | pace L (page 7) |                |                         |             | \$              |            |                  |

| LEGAL NAME OF OWN Nortex Commun              |          |                | -              |                       |            |                 | 5984 SYSTEM ID# | Name                      |
|--|----------|----------------|----------------|-----------------------|------------|-----------------|-----------------|---------------------------|
|  | BLOCK A: | COMPUTATION C  | F BASE RA      | TE FEES FOR EAC       | CH SUBSCRI | BER GROUP       |                 |                           |
|  |          | SUBSCRIBER GRO |                |                       |            | SUBSCRIBER GROU |                 | 9                         |
| COMMUNITY/ AREA                              |          |                | 0              | COMMUNITY/ ARE        | Α          |                 | 0               | Computation               |
| CALL SIGN                                    | DSE      | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN       | DSE             | of                        |
|  |          |                |                |                       |            |                 |                 | Base Rate Fee             |
|  |          |                |                |                       |            |                 |                 | and                       |
|  |          |                |                |                       |            |                 |                 | Syndicated<br>Exclusivity |
|  |          | <b> </b>       | ••••           |                       | •••••      | -               |                 | Surcharge                 |
|  |          |                |                |                       |            |                 |                 | for                       |
|  |          |                |                |                       |            |                 |                 | Partially                 |
|  |          |                |                |                       |            |                 |                 | Distant                   |
|  |          | <b> </b>       |                |                       |            |                 |                 | Stations                  |
|  |          | <b> </b>       |                |                       |            |                 |                 |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          | <b> </b>       |                |                       |            |                 |                 |                           |
|  |          | <b> </b>       |                |                       |            |                 |                 |                           |
| Total DSEs                                   |          | Ш              | 0.00           | Total DSEs            |            | П               | 0.00            |                           |
| Gross Receipts First                         | Group    | \$             | 0.00           | Gross Receipts Sec    | ond Group  | \$              | 0.00            |                           |
|  |          |                |                |                       |            |                 |                 |                           |
| Base Rate Fee First                          |          | \$             | 0.00           | Base Rate Fee Sec     |            | \$              | 0.00            |                           |
|  |          | SUBSCRIBER GRO |                | ii —                  |            | SUBSCRIBER GROU | JP<br><b>0</b>  |                           |
| COMMUNITY/ AREA                              |          |                | 0              | COMMUNITY/ ARE        |            |                 |                 |                           |
| CALL SIGN                                    | DSE      | CALL SIGN      | DSE            | CALL SIGN             | DSE        | CALL SIGN       | DSE             |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          | <b> </b>       |                |                       |            |                 |                 |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          | <b> </b>       |                |                       |            |                 |                 |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          |                |                |                       |            |                 |                 |                           |
|  |          | <b> </b>       | ····           |                       |            |                 |                 |                           |
| 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<br>Enter here and in bloo |          |                | criber group a | us shown in the boxes | above.     | \$              |                 |                           |

|                      |  | IBER GROUD        | SHRSCP    | TE FEES FOR EACH                                 | OF BASE PA  | COMPLITATION                     | BI OCK A:  |  |
|----------------------|--|-------------------|-----------|--|-------------|----------------------------------|------------|--|
|                      | JP   | SUBSCRIBER GROU   |           | 11   |             | SUBSCRIBER GRO                   |            |  |
| 9                    | 0  |                   |           | COMMUNITY/ AREA                                  | 0           |                                  |            | COMMUNITY/ AREA                        |
| Computat<br>of       | DSE  | CALL SIGN         | DSE       | CALL SIGN  | DSE         | CALL SIGN                        | DSE        | CALL SIGN                              |
| Base Rate            | 202  | 07.22 0.011       | 302       | STILL STORY                                      | 202         | 0,122 0.011                      | 202        | 0.122 0.0.1                            |
| and                  |  |                   |           |  |             |                                  |            |  |
| Syndicate            |  |                   |           |  |             |                                  |            |  |
| Exclusiv             |  |                   |           |  |             |                                  |            |  |
| Surchar              |  |                   |           |  |             |                                  |            |  |
| for                  |  |                   |           |  |             |                                  |            |  |
| Partially<br>Distant |  |                   |           |  |             |                                  |            |  |
| Stations             |  |                   | <u></u>   |  |             |                                  |            |  |
| Otation              |  |                   | <u> </u>  |  |             |                                  |            |  |
|                      |  |                   |           |  |             |                                  |            |  |
|                      |  |                   |           |  |             |                                  |            |  |
|                      |  |                   |           |  |             |                                  |            |  |
|                      |  |                   |           |  |             |                                  |            |  |
|                      |  |                   |           |  |             |                                  |            |  |
|                      | 0.00   |                   |           | Total DSEs                                       | 0.00        | _                                |            | otal DSEs                              |
|                      | Gross Receipts Second Group \$ 0.00  |                   |           |  | 0.00        | oss Receipts First Group \$ 0.00 |            |  |
|                      |  |                   |           |  |             |                                  |            |  |
|                      | 0.00   | \$                | d Craun   |  |             |                                  |            |  |
|                      |  | <u> </u>          | a Group   | Base Rate Fee Seco                               | 0.00        | \$                               | Group      | ase Rate Fee First G                   |
|                      |  | I SUBSCRIBER GROU |           |  |             | SUBSCRIBER GRO                   |            |  |
|                      |  | I SUBSCRIBER GROU |           |  |             |                                  | ED SEVENTH | ONE HUNDRED OMMUNITY/ AREA             |
|                      | JP .   | SUBSCRIBER GROU   |           | ONE HUNDR  | OUP         |                                  | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | JP <b>0</b>  |                   | ED EIGHTH | ONE HUNDR  | 0<br>0      | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED                            |
|                      | DSE  |                   | ED EIGHTH | ONE HUNDR COMMUNITY/ AREA  CALL SIGN             | DSE         | SUBSCRIBER GRO                   | ED SEVENTH | ONE HUNDRED  DMMUNITY/ AREA  CALL SIGN |
|                      | DSE DSE DOMESTIC DOME | CALL SIGN         | DSE       | ONE HUNDR COMMUNITY/ AREA  CALL SIGN  Total DSEs | DSE DSE DSE | SUBSCRIBER GRO                   | DSE        | ONE HUNDRED DMMUNITY/ AREA CALL SIGN   |
|                      | DSE  |                   | DSE       | ONE HUNDR COMMUNITY/ AREA  CALL SIGN             | DSE         | SUBSCRIBER GRO                   | DSE        | ONE HUNDRED                            |

| <b>9</b> Computat of Base Rate | JP                |                                     |  | TE FEES FOR EACH  | F BASE RA   | COMPLITATION O               |          |                             |  |  |  |
|--------------------------------|-------------------|-------------------------------------|--|---|-------------|------------------------------|----------|-----------------------------|--|--|--|
| Computation of Base Rate       | JP                | CLIDCODIDED CDOLL                   |  | BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROU |             |                              |          |                             |  |  |  |
| Computation of Base Rate       |                   | SUBSCRIBER GROU                     | ED TENTH                               | ONE HUNDR   |             | SUBSCRIBER GRO               |          |                             |  |  |  |
| of<br>Base Rate<br>and         | COMMUNITY/ AREA 0 |                                     |  |   | 0           |                              |          | COMMUNITY/ AREA             |  |  |  |
| and                            | DSE               | CALL SIGN                           | DSE                                    | CALL SIGN   | DSE         | CALL SIGN                    | DSE      | CALL SIGN                   |  |  |  |
| 4                              |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
| Syndicat                       |                   |                                     |  |   |             |                              |          |                             |  |  |  |
| Exclusiv                       |                   |                                     |  |   |             |                              |          |                             |  |  |  |
| Surchar                        |                   |                                     |  |   |             |                              |          |                             |  |  |  |
| for<br>Partiall                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
| Distan                         |                   |                                     |  |   |             |                              |          |                             |  |  |  |
| Station                        |                   |                                     | ···                                    |   | <u></u>     |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
| ]                              |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                | 0.00              |                                     |  | Total DSEs  | 0.00        |                              |          | otal DSEs                   |  |  |  |
|                                | 0.00              | Gross Receipts Second Group \$ 0.00 |  |   | 0.00        | ross Receipts First Group \$ |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                | 0.00              | \$                                  | d Group                                | Base Rate Fee Secon   | 0.00        | \$                           | oup      | ase Rate Fee First Gr       |  |  |  |
|                                | JP                | SUBSCRIBER GROU                     | TWELVTH                                | ONE HUNDRED   | JP          | SUBSCRIBER GRO               | LEVENTH  | ONE HUNDRED E               |  |  |  |
|                                | 0                 |                                     |  | COMMUNITY/ AREA   | 0           |                              |          | OMMUNITY/ AREA              |  |  |  |
|                                | DSE               | CALL SIGN                           | DSE                                    | CALL SIGN   | DSE         | CALL SIGN                    | DSE      | CALL SIGN                   |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
| _                              |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     | ······································ |   | <del></del> |                              | <u> </u> |                             |  |  |  |
|                                |                   |                                     | <u> </u>                               |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
| ]                              |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                |                   |                                     |  |   |             |                              | <u> </u> |                             |  |  |  |
| -                              |                   |                                     |  |   |             |                              |          |                             |  |  |  |
|                                | 0.00              |                                     |  | Total DSEs  | 0.00        |                              |          | otal DSEs                   |  |  |  |
|                                | 0.00              | \$                                  | Group                                  | Gross Receipts Fourth   | 0.00        | \$                           | roup     | ross Receipts Third G       |  |  |  |
|                                |                   |                                     | •                                      |   |             |                              | •        | •                           |  |  |  |
|                                | 0.00              | \$                                  | Group                                  | Base Rate Fee Fourth  | 0.00        | \$                           | roup     | <b>ase Rate Fee</b> Third G |  |  |  |

| LEGAL NAME OF OWN<br>Nortex Commun |                     |                      |        |                       |           | :                | 5984 SYSTEM | Name                     |
|------------------------------------|---------------------|----------------------|--------|-----------------------|-----------|------------------|-------------|--------------------------|
|                                    |                     |                      |        | TE FEES FOR EAC       |           |                  |             |                          |
| ONE HUNDRED T                      | HIRTEENTH           | SUBSCRIBER GRO       | 0<br>0 | ONE HUNDRED F         |           | I SUBSCRIBER GRO | UP <b>0</b> | 9                        |
| CALL SIGN                          | DSE                 | CALL SIGN            | DSE    | CALL SIGN             | DSE       | CALL SIGN        | DSE         | Computation of           |
| CALL SIGN                          | DSE                 | CALL SIGN            | DSE    | CALL SIGN             | DSE       | CALL SIGN        | DSE         | Base Rate F              |
|                                    |                     |                      |        |                       |           |                  |             | and                      |
|                                    |                     |                      |        |                       |           |                  |             | Syndicated               |
|                                    |                     |                      |        |                       |           |                  |             | Exclusivity<br>Surcharge |
|                                    |                     |                      |        |                       |           |                  |             | for                      |
|                                    |                     |                      |        |                       |           |                  |             | Partially                |
|                                    |                     |                      |        |                       |           |                  |             | Distant<br>Stations      |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
| Total DSEs                         |                     |                      | 0.00   | Total DSEs            |           |                  | 0.00        |                          |
| Gross Receipts First               | Group               | \$                   | 0.00   | Gross Receipts Sec    | ond Group | \$               | 0.00        |                          |
| Base Rate Fee First                | Group               | \$                   | 0.00   | Base Rate Fee Sec     | ond Group | \$               | 0.00        |                          |
| ONE HUNDRED                        | FIFTEENTH           | SUBSCRIBER GRO       | DUP    | ONE HUNDREI           | SIXTEENTH | SUBSCRIBER GRO   | UP          |                          |
| COMMUNITY/ AREA                    |                     |                      | 0      | COMMUNITY/ ARE        |           |                  |             |                          |
| CALL SIGN                          | DSE                 | CALL SIGN            | DSE    | CALL SIGN             | DSE       | CALL SIGN        | DSE         |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
|                                    |                     |                      |        |                       |           |                  |             |                          |
| F-+-1 DOF                          |                     |                      | 0.00   | T-4-1 DOE             |           |                  | 0.00        |                          |
| 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        |                          |
|                                    | the <b>base rat</b> | e fees for each subs |        | as shown in the boxes |           | \$               | 0.00        |                          |

| Nortex Commun                               |            |                 | _              |                       |            | \$               | 5984 SYSTEM | Name                     |
|---|------------|-----------------|----------------|-----------------------|------------|------------------|-------------|--------------------------|
|   | BLOCK A:   | COMPUTATION C   | OF BASE RA     | ATE FEES FOR EAC      | CH SUBSCR  | BER GROUP        |             |                          |
| ONE HUNDRED S                               | EVENTEENTH | SUBSCRIBER GROU | Р              | ONE HUNDRED           | EIGHTEENTH | SUBSCRIBER GROUP |             | ^                        |
| COMMUNITY/ AREA                             |            |                 | 0              | COMMUNITY/ ARE        | Α          |                  | 0           | 9<br>Computation         |
| CALL SIGN                                   | DSE        | CALL SIGN       | DSE            | CALL SIGN             | DSE        | CALL SIGN        | DSE         | of                       |
|   |            |                 |                |                       |            |                  |             | Base Rate Fee            |
|   |            |                 |                |                       |            |                  |             | and                      |
|   |            |                 |                |                       |            |                  |             | Syndicated               |
|   |            | -               | ••••           |                       |            | H                |             | Exclusivity<br>Surcharge |
|   |            | <b> </b>        |                |                       |            | <del></del>      |             | for                      |
|   |            |                 |                |                       |            |                  |             | Partially                |
|   |            |                 |                |                       |            |                  |             | Distant                  |
|   |            |                 |                |                       |            |                  |             | Stations                 |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            | -                |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
| Total DSEs                                  |            |                 | 0.00           | Total DSEs            |            |                  | 0.00        |                          |
| Gross Receipts First                        | Group      | \$              | 0.00           | Gross Receipts Sec    | ond Group  | \$               | 0.00        |                          |
| Base Rate Fee First                         | Group      | \$              | 0.00           | Base Rate Fee Sec     | ond Group  | \$               | 0.00        |                          |
| ONE HUNDRED                                 | NINTEENTH  | SUBSCRIBER GRO  | UP             | ONE HUNDRED           | TWENTIETH  | SUBSCRIBER GROU  | JP          |                          |
| COMMUNITY/ AREA                             |            |                 | 0              | COMMUNITY/ ARE        |            |                  |             |                          |
| CALL SIGN                                   | DSE        | CALL SIGN       | DSE            | CALL SIGN             | DSE        | CALL SIGN        | DSE         |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            | <b> </b>        |                |                       |            | -                |             |                          |
|   |            |                 | •••••          |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
|   |            | -               |                |                       |            |                  |             |                          |
|   |            |                 |                |                       |            |                  |             |                          |
| Total DSEs                                  |            |                 | 0.00           | Total DSEs            |            |                  | 0.00        |                          |
| Gross Receipts Third                        | l Group    | \$              | 0.00           | Gross Receipts Fou    | rth Group  | \$               | 0.00        |                          |
| Base Rate Fee Third                         | l Group    | \$              | 0.00           | Base Rate Fee Fou     | rth Group  | \$               | 0.00        |                          |
| Base Rate Fee: Add<br>Enter here and in blo |            |                 | criber group a | as shown in the boxes | above.     | \$               |             |                          |

| Name       | YSTEM ID#<br>5984 | S                |                 |                                  |          |                                  |                  | LEGAL NAME OF OWNE Nortex Communic   |
|------------|-------------------|------------------|-----------------|----------------------------------|----------|----------------------------------|------------------|--------------------------------------|
|            |                   | BER GROUP        | SUBSCRIE        | TE FEES FOR EACH                 | BASE RA  | COMPUTATION C                    | BLOCK A:         | E                                    |
| 0          |                   | SUBSCRIBER GROUP | Y-SECOND        | ONE HUNDRED TWENT                |          | SUBSCRIBER GROUI                 | NTY-FIRST        | ONE HUNDRED TWE                      |
| 9          | 0                 |                  |                 | COMMUNITY/ AREA                  | 0        |                                  |                  | COMMUNITY/ AREA                      |
| Computa of | DSE               | CALL SIGN        | DSE             | CALL SIGN                        | DSE      | CALL SIGN                        | DSE              | CALL SIGN                            |
| Base Rate  |                   |                  |                 |                                  |          |                                  |                  |                                      |
| and        |                   |                  |                 |                                  |          |                                  |                  |                                      |
| Syndicat   |                   |                  |                 |                                  |          |                                  |                  |                                      |
| Exclusiv   |                   |                  |                 |                                  |          |                                  |                  |                                      |
| Surchar    |                   |                  |                 |                                  |          |                                  |                  |                                      |
| for        |                   |                  |                 |                                  |          |                                  |                  |                                      |
| Partiall   |                   |                  |                 |                                  |          | -                                |                  |                                      |
| Distant    |                   |                  |                 |                                  |          |                                  |                  |                                      |
| Station    |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  | <del></del>      |                                      |
|            |                   |                  | ļ               |                                  |          |                                  | <u></u>          |                                      |
|            |                   |                  | <b> </b>        |                                  |          |                                  | <del></del>      |                                      |
|            |                   |                  |                 |                                  |          |                                  | <del> </del>     |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            | 0.00              |                  |                 | Total DSEs                       | 0.00     |                                  |                  | otal DSEs                            |
|            | 0.00              | \$               | l Group         | Gross Receipts Second            | 0.00     | ross Receipts First Group \$ 0.0 |                  |                                      |
|            | 0.00              | \$               | I Group         | Base Rate Fee Second             | 0.00     | \$                               | roup             | Base Rate Fee First Gr               |
|            | 0.00              |                  |                 |                                  | '        |                                  |                  |                                      |
|            |                   | SUBSCRIBER GROUP | Y-FOURTH        | ONE HUNDRED TWEN                 |          | SUBSCRIBER GROUI                 | NTY-THIRD        | ONE HUNDRED TWE                      |
|            | 0                 |                  | COMMUNITY/ AREA | 0                                |          |                                  | COMMUNITY/ AREA  |                                      |
|            | DSE               | CALL SIGN        | DSE             | CALL SIGN                        | DSE      | CALL SIGN                        | DSE              | CALL SIGN                            |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  | <del></del>      |                                      |
|            |                   |                  |                 |                                  |          |                                  | <del></del>      |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  | <b> </b>        |                                  | -        |                                  |                  |                                      |
|            |                   |                  | ļ               |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  | <u> </u> | <del> </del>                     | ··· <del> </del> |                                      |
|            | <u></u>           |                  |                 |                                  |          |                                  |                  |                                      |
|            |                   |                  |                 |                                  |          |                                  |                  |                                      |
|            | 0.00              |                  |                 | Total DSEs                       | 0.00     |                                  |                  | Fotal DSEs                           |
|            | 0.00              |                  | 0               | Total DSEs                       | 0.00     |                                  | <u></u>          |                                      |
|            | 0.00              | \$               | Group           | Total DSEs Gross Receipts Fourth | 0.00     | \$                               | Group            | Fotal DSEs<br>Gross Receipts Third G |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |             |                 |                |                       |             |                  |      |                  |
|---|-------------|-----------------|----------------|-----------------------|-------------|------------------|------|------------------|
|   |             |                 |                | TE FEES FOR EAC       | CH SUBSCR   | IBER GROUP       |      |                  |
|   |             | SUBSCRIBER GROU |                | Ħ                     |             | SUBSCRIBER GROUP |      | 9                |
| COMMUNITY/ AREA   |             |                 | 0              | COMMUNITY/ ARE        | Α           |                  | 0    | Computation      |
| CALL SIGN   | DSE         | CALL SIGN       | DSE            | CALL SIGN             | DSE         | CALL SIGN        | DSE  | of               |
|   |             |                 |                |                       |             |                  |      | Base Rate Fe     |
|   |             |                 |                |                       |             |                  |      | and              |
|   |             |                 |                |                       |             |                  |      | Syndicated       |
|   |             |                 |                |                       |             |                  |      | Exclusivity      |
|   |             |                 |                | -                     |             |                  |      | Surcharge<br>for |
|   |             |                 |                |                       |             |                  |      | Partially        |
|   |             |                 |                |                       |             |                  |      | Distant          |
|   |             |                 |                |                       |             |                  |      | Stations         |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
| Total DSEs  |             |                 | 0.00           | Total DSEs            |             |                  | 0.00 |                  |
| Gross Receipts First  | Group       | \$              | 0.00           | Gross Receipts Sec    | ond Group   | \$               | 0.00 |                  |
| Base Rate Fee First   | Group       | \$              | 0.00           | Base Rate Fee Sec     | ond Group   | \$               | 0.00 |                  |
| ONE HUNDRED TWEN  | ITY-SEVENTH | SUBSCRIBER GROU | Р              | ONE HUNDRED TW        | ENTY-EIGHTH | SUBSCRIBER GROUP | )    |                  |
| COMMUNITY/ AREA   |             |                 | 0              | COMMUNITY/ ARE        |             |                  |      |                  |
| CALL SIGN   | DSE         | CALL SIGN       | DSE            | CALL SIGN             | DSE         | CALL SIGN        | DSE  |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                | -                     |             |                  |      |                  |
|   |             | <b> </b>        |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
|   |             |                 |                |                       |             |                  |      |                  |
| Total DSEs  |             |                 | 0.00           | Total DSEs            |             |                  | 0.00 |                  |
| Gross Receipts Third  | I Group     | \$              | 0.00           | Gross Receipts Fou    | rth Group   | \$               | 0.00 |                  |
|   |             | ·               |                |                       | Pa          | ·                |      |                  |
| Base Rate Fee Third   | l Group     | \$              | 0.00           | Base Rate Fee Fou     | rth Group   | \$               | 0.00 |                  |
| Base Rate Fee: Add<br>Enter here and in blo                                       |             |                 | criber group a | as shown in the boxes | above.      | \$               |      |                  |

| LEGAL NAME OF OWNE                             |            |                  |              |                                |           | S                | SYSTEM ID# | Nome             |
|--|------------|------------------|--------------|--------------------------------|-----------|------------------|------------|------------------|
| Nortex Communic                                | ations C   | o.               |              |                                |           |                  | 5984       | Name             |
|  | BLOCK A:   | COMPUTATION OF   | BASE RA      | ATE FEES FOR EACH              | SUBSCR    | BER GROUP        |            |                  |
|  |            | SUBSCRIBER GROUP |              | II                             |           | SUBSCRIBER GROUP |            | _                |
| COMMUNITY/ AREA                                |            |                  | 0            | COMMUNITY/ AREA                |           |                  | 0          | 9<br>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         |
|  |            |                  |              |                                |           |                  |            |                  |
|  |            |                  | ļ            |                                | <u> </u>  |                  |            |                  |
|  |            |                  | <b></b>      |                                | <u>-</u>  |                  |            |                  |
|  |            |                  |              | -                              | -         |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
| Total DSEs                                     |            | <u> </u>         | 0.00         | Total DSEs                     |           | Ц                | 0.00       |                  |
| Gross Receipts First G                         | roup       | \$               | 0.00         | Gross Receipts Secon           | d Group   | \$               | 0.00       |                  |
|  |            |                  |              |                                |           |                  |            |                  |
| Base Rate Fee First G                          | roup       | \$               | 0.00         | Base Rate Fee Secon            | d Group   | \$               | 0.00       |                  |
| ONE HUNDRED TH                                 | IRTY-FIRST | SUBSCRIBER GROUP |              | ONE HUNDRED THIR               | TY-SECOND | SUBSCRIBER GROUP |            |                  |
| COMMUNITY/ AREA                                |            |                  | 0            | COMMUNITY/ AREA                |           |                  |            |                  |
| CALL SIGN                                      | DSE        | CALL SIGN        | DSE          | CALL SIGN                      | DSE       | CALL SIGN        | DSE        |                  |
|  |            |                  |              |                                |           |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
|  | <u></u>    |                  |              |                                |           |                  |            |                  |
|  |            |                  |              |                                | •         | -                |            |                  |
|  | <u> </u>   |                  | <b></b>      |                                | <b></b>   |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
|  |            |                  | <u> </u>     |                                |           |                  |            |                  |
|  |            |                  |              |                                |           |                  |            |                  |
| Total DSEs                                     |            |                  | 0.00         | Total DSEs                     |           |                  | 0.00       |                  |
| Gross Receipts Third 0                         | Group      | \$               | 0.00         | Gross Receipts Fourth          | Group     | \$               | 0.00       |                  |
|  | •          |                  |              | ,                              | •         |                  |            |                  |
| Base Rate Fee Third (                          | Group      | \$               | 0.00         | Base Rate Fee Fourth           | Group     | \$               | 0.00       |                  |
| Base Rate Fee: Add the Enter here and in block |            |                  | iber group a | II<br>as shown in the boxes ab | ove.      | \$               |            |                  |

| LEGAL NAME OF OWNE                             |             |                  |               |                          |               | s                | SYSTEM ID# | Name             |
|--|-------------|------------------|---------------|--------------------------|---------------|------------------|------------|------------------|
| Nortex Communic                                | cations C   | 0.               |               |                          |               |                  | 5984       | Hante            |
|  | BLOCK A:    | COMPUTATION O    | F BASE RA     | ATE FEES FOR EACH        | SUBSCR        | BER GROUP        |            |                  |
| ONE HUNDRED TH                                 | IRTY-THIRD  | SUBSCRIBER GROUP | )             | ONE HUNDRED THIR         | TY-FOURTH     | SUBSCRIBER GROUP |            | ^                |
| COMMUNITY/ AREA                                |             |                  | 0             | COMMUNITY/ AREA          |               |                  | 0          | 9<br>Computation |
| CALL SIGN                                      | DSE         | CALL SIGN        | DSE           | CALL SIGN                | DSE           | CALL SIGN        | DSE        | of               |
| 07.122.01.01.1                                 | 332         | 07.22 5.5.1      | 202           | 07.122 070.1             |               | 07.122 0.011     | 332        | Base Rate Fee    |
|  | ••••        |                  |               |                          | ••••••••••••• |                  |            | and              |
|  |             |                  |               |                          |               |                  |            | Syndicated       |
|  |             |                  |               |                          |               |                  |            | Exclusivity      |
|  |             |                  |               |                          |               |                  |            | Surcharge        |
|  |             |                  |               |                          |               |                  |            | for              |
|  |             |                  |               |                          |               | <br>             |            | Partially        |
|  |             |                  |               |                          |               |                  |            | Distant          |
|  |             |                  | <u></u>       |                          |               |                  |            | Stations         |
|  |             |                  |               |                          |               |                  |            |                  |
|  |             |                  | <u></u>       |                          |               |                  |            |                  |
|  |             |                  |               |                          |               |                  |            |                  |
|  |             |                  | <del></del>   |                          |               |                  |            |                  |
|  |             |                  |               |                          |               |                  |            |                  |
| Total DSEs                                     |             | <u>II</u>        | 0.00          | Total DSEs               |               | <u> </u>         | 0.00       |                  |
| Gross Receipts First G                         | roup        | \$               | 0.00          | Gross Receipts Secon     | d Group       | \$               | 0.00       |                  |
|  |             |                  |               |                          |               |                  |            |                  |
| Base Rate Fee First G                          | roup        | \$               | 0.00          | Base Rate Fee Secon      | d Group       | \$               | 0.00       |                  |
| ONE HUNDRED THI                                | RTY-FIFTH   | SUBSCRIBER GRO   | UP            | ONE HUNDRED THI          | RTY-SIXTH     | SUBSCRIBER GROU  | JP         |                  |
| COMMUNITY/ AREA                                |             |                  | 0             | COMMUNITY/ AREA          |               |                  |            |                  |
| CALL SIGN                                      | DSE         | CALL SIGN        | DSE           | CALL SIGN                | DSE           | CALL SIGN        | DSE        |                  |
|  |             |                  |               |                          |               |                  |            |                  |
|  |             |                  | <u></u>       |                          |               |                  |            |                  |
|  |             |                  | <u></u>       |                          | <u></u>       |                  |            |                  |
|  |             |                  | ···           |                          | <u> </u>      | -                |            |                  |
|  |             |                  |               |                          | <u> </u>      | -                |            |                  |
|  |             |                  |               |                          |               | -                |            |                  |
|  |             |                  |               |                          |               |                  |            |                  |
|  |             |                  |               |                          |               |                  |            |                  |
|  |             |                  |               |                          |               |                  |            |                  |
|  |             |                  |               |                          |               |                  |            |                  |
|  |             |                  | <u></u>       |                          | <u></u>       | -                |            |                  |
|  |             |                  | <u></u>       |                          | <u>.</u>      |                  |            |                  |
|  |             |                  | <del> </del>  |                          |               |                  |            |                  |
| Total DSEs                                     |             | П                | 0.00          | Total DSEs               |               | Ш                | 0.00       |                  |
| Gross Receipts Third (                         | Group       | \$               | 0.00          | Gross Receipts Fourth    | Group         | \$               | 0.00       |                  |
| . C. Coo I too op to Tilliu (                  | оч <b>р</b> | ·                | 0.50          | 2.000 Acocipio i oditii  | J.5up         | <del>*</del>     |            |                  |
| Base Rate Fee Third (                          | Group       | \$               | 0.00          | Base Rate Fee Fourth     | Group         | \$               | 0.00       |                  |
| Base Rate Fee: Add the Enter here and in block |             |                  | riber group a | as shown in the boxes ab | oove.         | \$               |            |                  |

| LEGAL NAME OF OWNER OF CABLE SYSTEM:  Nortex Communications Co.  SYSTEM ID#  5984 |             |                 |                |                       |              |                  |      |                          |
|---|-------------|-----------------|----------------|-----------------------|--------------|------------------|------|--------------------------|
|   | BLOCK A:    | COMPUTATION (   | OF BASE RA     | TE FEES FOR EAC       | CH SUBSCR    | IBER GROUP       |      |                          |
| ONE HUNDRED THIS  | RTY-SEVENTH | SUBSCRIBER GROU | Р              | ONE HUNDRED T         | HIRTY-EIGHTH | SUBSCRIBER GROUP | )    | 0                        |
| COMMUNITY/ AREA   |             |                 | 0              | COMMUNITY/ ARE        | Α            |                  | 0    | 9<br>Computation         |
| CALL SIGN   | DSE         | CALL SIGN       | DSE            | CALL SIGN             | DSE          | CALL SIGN        | DSE  | of                       |
|   |             |                 |                |                       |              |                  |      | Base Rate F              |
|   |             |                 |                |                       |              |                  |      | and                      |
|   |             |                 |                |                       |              |                  |      | Syndicated               |
|   |             |                 |                |                       |              |                  |      | Exclusivity<br>Surcharge |
|   | •••••       | <b> </b>        |                |                       |              |                  |      | for                      |
|   |             |                 |                |                       |              |                  |      | Partially                |
|   |             |                 |                |                       |              |                  |      | Distant                  |
|   |             |                 |                |                       |              |                  |      | Stations                 |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             | <b> </b>        |                |                       |              | H                |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
| otal DSEs   |             |                 | 0.00           | Total DSEs            |              |                  | 0.00 |                          |
| Gross Receipts First  | Group       | \$              | 0.00           | Gross Receipts Sec    | ond Group    | \$               | 0.00 |                          |
|   |             |                 |                |                       |              |                  |      |                          |
| Base Rate Fee First   | Group       | \$              | 0.00           | Base Rate Fee Sec     | ond Group    | \$               | 0.00 |                          |
| ONE HUNDRED TH  | IIRTY-NINTH | SUBSCRIBER GRO  | DUP            | ONE HUNDRE            | D FORTIETH   | SUBSCRIBER GRO   | UP   |                          |
| COMMUNITY/ AREA   |             |                 | 0              | COMMUNITY/ ARE        |              |                  |      |                          |
| CALL SIGN   | DSE         | CALL SIGN       | DSE            | CALL SIGN             | DSE          | CALL SIGN        | DSE  |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   | •••••       | <b> </b>        |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             | <b> </b>        |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
|   |             |                 |                |                       |              |                  |      |                          |
| Total DSEs  |             |                 | 0.00           | Total DSEs            |              |                  | 0.00 |                          |
| Gross Receipts Third  | I Group     | \$              | 0.00           | Gross Receipts Fou    | rth Group    | \$               | 0.00 |                          |
| <b>Base Rate Fee</b> Third  | l Group     | \$              | 0.00           | Base Rate Fee Fou     | rth Group    | \$               | 0.00 |                          |
|   |             |                 |                |                       |              |                  |      |                          |
| Base Rate Fee: Add<br>Enter here and in blo                                       |             |                 | criber group a | as shown in the boxes | above.       | \$               |      |                          |

| LEGAL NAME OF OWN Nortex Commun             |            |                  | -              |                             |             | •                | 5984 SYSTEM ID# | Name                     |
|---|------------|------------------|----------------|-----------------------------|-------------|------------------|-----------------|--------------------------|
|   | BLOCK A:   | COMPUTATION C    | F BASE RA      | TE FEES FOR EAC             | CH SUBSCRI  | BER GROUP        |                 |                          |
| ONE HUNDRED I                               | ORTY-FIRST | SUBSCRIBER GROUI |                | ONE HUNDRED FO              | ORTY-SECOND | SUBSCRIBER GROUP | )               | 9                        |
| COMMUNITY/ AREA                             |            |                  | 0              | COMMUNITY/ ARE              | Α           |                  | 0               | Computation              |
| CALL SIGN                                   | DSE        | CALL SIGN        | DSE            | CALL SIGN                   | DSE         | CALL SIGN        | DSE             | of                       |
|   |            |                  |                |                             |             |                  |                 | Base Rate Fee            |
|   |            |                  |                |                             |             |                  |                 | and                      |
|   |            |                  |                |                             | ······      |                  |                 | Syndicated               |
|   |            |                  |                |                             |             |                  |                 | Exclusivity<br>Surcharge |
|   |            |                  |                |                             |             |                  |                 | for                      |
|   |            |                  |                |                             |             |                  |                 | Partially                |
|   |            |                  |                |                             |             |                  |                 | Distant                  |
|   |            |                  |                |                             | ······      |                  |                 | Stations                 |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
| Total DSEs                                  |            |                  | 0.00           | Total DSEs                  |             |                  | 0.00            |                          |
| Gross Receipts First                        | Group      | \$               | 0.00           | Gross Receipts Sec          | ond Group   | \$               | 0.00            |                          |
|   | <b>-</b>   |                  |                |                             |             | · ·              |                 |                          |
| Base Rate Fee First                         | Group      | \$               | 0.00           | Base Rate Fee Sec           | ond Group   | \$               | 0.00            |                          |
|   |            | SUBSCRIBER GROUI |                | ii .                        |             | SUBSCRIBER GROUP |                 |                          |
| COMMUNITY/ AREA                             |            |                  | 0              | COMMUNITY/ ARE              | Α           |                  | 0               |                          |
| CALL SIGN                                   | DSE        | CALL SIGN        | DSE            | CALL SIGN                   | DSE         | CALL SIGN        | DSE             |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             | ······      |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             | ······      |                  |                 |                          |
|   |            |                  |                |                             |             | -                |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
|   |            |                  |                |                             |             |                  |                 |                          |
| Total DSEs                                  |            |                  | 0.00           | Total DSEs                  |             |                  | 0.00            |                          |
| Gross Receipts Third                        | 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<br>Enter here and in blo |            |                  | criber group a | II<br>as shown in the boxes | above.      | \$               |                 |                          |

| Nortex Commun                               |             |                  |                |                             |             | \$               | 5984 SYSTEM ID# | Name                     |
|---|-------------|------------------|----------------|-----------------------------|-------------|------------------|-----------------|--------------------------|
|   | BLOCK A:    | COMPUTATION C    | F BASE RA      | TE FEES FOR EAC             | CH SUBSCRI  | BER GROUP        |                 |                          |
| ONE HUNDRED                                 | FORTY-FIFTH | SUBSCRIBER GROUI | <b>D</b>       | ONE HUNDRED                 | FORTY-SIXTH | SUBSCRIBER GROUP |                 | ^                        |
| COMMUNITY/ AREA                             |             |                  | 0              | COMMUNITY/ AREA 0           |             |                  |                 | <b>9</b> Computation     |
| CALL SIGN                                   | DSE         | CALL SIGN        | DSE            | CALL SIGN                   | DSE         | CALL SIGN        | DSE             | of                       |
|   |             |                  |                |                             |             |                  |                 | Base Rate Fee            |
|   |             |                  |                |                             |             |                  |                 | and                      |
|   |             |                  |                |                             |             |                  |                 | Syndicated               |
|   |             |                  |                |                             |             |                  |                 | Exclusivity<br>Surcharge |
|   |             |                  |                |                             |             |                  |                 | for                      |
|   |             |                  |                |                             |             |                  |                 | Partially                |
|   |             |                  |                |                             |             |                  |                 | Distant                  |
|   |             | <b> </b>         |                |                             |             |                  |                 | Stations                 |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
| Total DSEs                                  |             |                  | 0.00           | Total DSEs                  |             |                  | 0.00            |                          |
| Gross Receipts First                        | Group       | \$               | 0.00           | Gross Receipts Sec          | ond Group   | \$               | 0.00            |                          |
| Base Rate Fee First                         | Group       | \$               | 0.00           | Base Rate Fee Sec           | ond Group   | \$               | 0.00            |                          |
| ONE HUNDRED FOR                             | RTY-SEVENTH | SUBSCRIBER GROU  | D              | ONE HUNDRED F               | ORTY-EIGHTH | SUBSCRIBER GROUP |                 |                          |
| COMMUNITY/ AREA                             |             |                  | 0              | COMMUNITY/ ARE              | Α           |                  | 0               |                          |
| CALL SIGN                                   | DSE         | CALL SIGN        | DSE            | CALL SIGN                   | DSE         | CALL SIGN        | DSE             |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             | -                |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             | <b> </b>         |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
|   |             |                  |                |                             |             |                  |                 |                          |
| Total DSEs                                  |             |                  | 0.00           | Total DSEs                  |             |                  | 0.00            |                          |
| Gross Receipts Third                        | I Group     | \$               | 0.00           | Gross Receipts Fou          | rth Group   | \$               | 0.00            |                          |
| Base Rate Fee Third                         | l Group     | \$               | 0.00           | Base Rate Fee Fou           | rth Group   | \$               | 0.00            |                          |
| Base Rate Fee: Add<br>Enter here and in blo |             |                  | criber group a | II<br>as shown in the boxes | above.      | \$               |                 |                          |

| LEGAL NAME OF OWNE                               |          |                |               |                          |          | S               | SYSTEM ID# | Name             |
|--|----------|----------------|---------------|--------------------------|----------|-----------------|------------|------------------|
| Nortex Communic                                  | ations C | 0.             |               |                          |          |                 | 5984       | name             |
| E  | BLOCK A: | COMPUTATION O  | F BASE RA     | ATE FEES FOR EACH        | SUBSCR   | BER GROUP       |            |                  |
| ONE HUNDRED FOR                                  |          |                |               | 11                       |          | SUBSCRIBER GROU | JP         | _                |
| COMMUNITY/ AREA                                  |          |                | 0             | COMMUNITY/ AREA          |          |                 | 0          | 9<br>Computation |
| CALL SIGN  | DSE      | CALL SIGN      | DSE           | CALL SIGN                | DSE      | CALL SIGN       | DSE        | of               |
| 3.12.3.3.  |          |                |               |                          |          |                 |            | Base Rate Fee    |
|  |          |                |               |                          |          |                 |            | and              |
|  |          |                |               |                          |          |                 |            | Syndicated       |
|  |          |                |               |                          |          |                 |            | Exclusivity      |
|  |          |                |               |                          |          |                 |            | Surcharge        |
|  |          |                |               |                          |          |                 |            | for              |
|  |          |                |               |                          |          |                 |            | Partially        |
|  |          |                |               |                          |          |                 |            | Distant          |
|  |          |                | <mark></mark> |                          |          |                 |            | Stations         |
|  |          |                | <del></del>   |                          | <u> </u> |                 |            |                  |
|  |          |                |               |                          |          | -               | <u></u>    |                  |
|  | <u> </u> |                | <u> </u>      |                          | <b></b>  |                 |            |                  |
|  |          |                | <u> </u>      |                          |          |                 |            |                  |
|  |          |                |               |                          |          |                 |            |                  |
| Total DSEs                                       |          |                | 0.00          | Total DSEs               |          |                 | 0.00       |                  |
| Gross Receipts First G                           | roup     | \$             | 0.00          | Gross Receipts Secon     | d Group  | \$              | 0.00       |                  |
|  |          |                |               |                          |          |                 |            |                  |
| Base Rate Fee First G                            | roup     | \$             | 0.00          | Base Rate Fee Secon      | d Group  | \$              | 0.00       |                  |
| ONE HUNDRED FIR                                  | TY-FIRST | SUBSCRIBER GRO | UP            | ONE HUNDRED FIFT         | Y-SECOND | SUBSCRIBER GROU | JP         |                  |
| COMMUNITY/ AREA                                  |          |                | 0             | COMMUNITY/ AREA          |          |                 | 0          |                  |
| CALL SIGN  | DSE      | CALL SIGN      | DSE           | CALL SIGN                | DSE      | CALL SIGN       | DSE        |                  |
|  |          |                |               |                          |          |                 |            |                  |
|  |          |                |               |                          |          | <br> -          |            |                  |
|  |          |                | <u></u>       |                          |          |                 |            |                  |
|  |          |                | <u></u>       |                          |          |                 |            |                  |
|  |          |                | <del> </del>  |                          |          |                 |            |                  |
|  |          |                | <del></del>   |                          | <u></u>  |                 |            |                  |
|  |          |                |               |                          |          |                 |            |                  |
|  |          |                |               |                          |          |                 |            |                  |
|  |          |                |               |                          |          |                 |            |                  |
|  |          |                |               |                          |          |                 |            |                  |
|  |          |                | <u></u>       |                          |          |                 |            |                  |
|  |          |                | <u></u>       |                          |          |                 |            |                  |
|  |          |                | <del> </del>  |                          | <u> </u> |                 |            |                  |
| Total DSEs                                       |          |                | 0.00          | Total DSEs               | 1        |                 | 0.00       |                  |
| Gross Receipts Third G                           | Group    | \$             | 0.00          | Gross Receipts Fourth    | Group    | \$              | 0.00       |                  |
|  | : =: F   |                |               | Sura                     | 2 F      | ·               |            |                  |
| Base Rate Fee Third G                            | Group    | \$             | 0.00          | Base Rate Fee Fourth     | Group    | \$              | 0.00       |                  |
| Base Rate Fee: Add th<br>Enter here and in block |          |                | riber group a | as shown in the boxes at | oove.    | \$              |            |                  |

| LEGAL NAME OF OWN      |                |                 |                 |                         |             |                 | SYSTEM ID# | Name                |
|------------------------|----------------|-----------------|-----------------|-------------------------|-------------|-----------------|------------|---------------------|
| Nortex Communi         | cations C      | 0.              |                 |                         |             |                 | 5984       | Hailie              |
|                        | BLOCK A:       | COMPUTATION C   | F BASE RA       | TE FEES FOR EACH        |             |                 |            |                     |
|                        | IFTY-THIRD     | SUBSCRIBER GRO  |                 | ii                      | ΓY-FOURT    | SUBSCRIBER GROU |            | ۵                   |
| COMMUNITY/ AREA 0      |                | 0               | COMMUNITY/ AREA |                         |             | 0               | 9          |                     |
| CALL SIGN              | Dec            | CALL SIGN       | Dec             | CALL SIGN               | Dec         | I CALL SIGN     | Dec        | Computation         |
| CALL SIGN              | DSE            | CALL SIGN       | DSE             | CALL SIGN               | DSE         | CALL SIGN       | DSE        | of<br>Base Rate Fee |
|                        |                | <b> </b>        |                 |                         |             |                 |            | and                 |
|                        |                |                 |                 |                         |             |                 |            | Syndicated          |
|                        |                |                 |                 |                         |             |                 |            | Exclusivity         |
|                        |                |                 |                 |                         |             |                 |            | Surcharge           |
|                        |                |                 |                 |                         |             |                 |            | for                 |
|                        |                |                 |                 |                         |             |                 |            | Partially           |
|                        |                |                 |                 |                         |             |                 |            | Distant             |
|                        |                |                 |                 |                         |             |                 |            | Stations            |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
| Total DSEs             |                |                 | 0.00            | Total DSEs              |             |                 | 0.00       |                     |
|                        |                |                 | 0.00            | Gross Receipts Secon    | nd Group    | •               | 0.00       |                     |
| Gloss Necelpls I list  | 310up          | \$              | 0.00            | Gloss Necelpts Secol    | iu Group    | \$              | 0.00       |                     |
|                        | _              |                 |                 |                         |             |                 |            |                     |
| Base Rate Fee First (  | iroup          | \$              | 0.00            | Base Rate Fee Secon     | nd Group    | \$              | 0.00       |                     |
| ONE HUNDRED F          | IFTY-FIFTH     | SUBSCRIBER GRO  | UP              | ONE HUNDRED F           | IFTY-SIXTH  | SUBSCRIBER GROU | JP         |                     |
| COMMUNITY/ AREA        |                |                 | 0               | COMMUNITY/ AREA         |             |                 | 0          |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
| CALL SIGN              | DSE            | CALL SIGN       | DSE             | CALL SIGN               | DSE         | CALL SIGN       | DSE        |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 | ·····           |                         |             |                 |            |                     |
|                        |                | <b> </b>        |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         | ••••••••••• |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 |                 | -                       |             |                 |            |                     |
|                        |                | <b> </b>        |                 | -                       |             |                 |            |                     |
| Total DSEs             |                | П               | 0.00            | Total DSEs              | 1           | 11              | 0.00       |                     |
|                        |                |                 | -               |                         |             |                 |            |                     |
| Gross Receipts Third   | Group          | \$              | 0.00            | Gross Receipts Fourth   | h Group     | \$              | 0.00       |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
| Base Rate Fee Third    | Group          | \$              | 0.00            | Base Rate Fee Fourth    | h Group     | \$              | 0.00       |                     |
|                        |                |                 |                 |                         |             |                 | 1          |                     |
|                        |                |                 |                 |                         |             |                 |            |                     |
|                        |                |                 | criber group a  | as shown in the boxes a | bove.       |                 |            |                     |
| Enter here and in bloc | k 3, line 1, s | pace L (page 7) |                 |                         |             | \$              |            |                     |

| LEGAL NAME OF OWNE                             |           |                  |                |                          |              | S                | SYSTEM ID# | Name             |
|--|-----------|------------------|----------------|--------------------------|--------------|------------------|------------|------------------|
| Nortex Communic                                | ations C  | 0.               |                |                          |              |                  | 5984       | Name             |
|  | BLOCK A:  | COMPUTATION O    | F BASE RA      | ATE FEES FOR EACH        | SUBSCR       | BER GROUP        |            |                  |
| ONE HUNDRED FIFT                               | Y-SEVENTH | SUBSCRIBER GROUP | )              | ONE HUNDRED FIR          | TY-EIGHTH    | SUBSCRIBER GROUP |            | ^                |
| COMMUNITY/ AREA                                |           |                  | 0              | COMMUNITY/ AREA          |              |                  | 0          | 9<br>Computation |
| CALL SIGN                                      | DSE       | CALL SIGN        | DSE            | CALL SIGN                | DSE          | CALL SIGN        | DSE        | of               |
|  |           |                  |                |                          |              |                  |            | Base Rate Fee    |
|  |           |                  |                |                          |              |                  |            | and              |
|  |           |                  |                |                          |              |                  |            | Syndicated       |
|  |           |                  |                |                          |              |                  |            | Exclusivity      |
|  |           |                  |                |                          |              |                  |            | Surcharge        |
|  |           |                  |                |                          |              |                  |            | for              |
|  |           |                  |                |                          |              |                  |            | Partially        |
|  |           |                  | <del></del>    |                          |              |                  |            | Distant          |
|  |           |                  | <del></del>    |                          | <u></u>      | H                |            | Stations         |
|  |           |                  |                |                          |              |                  |            |                  |
|  |           |                  | <u></u>        |                          |              | H                |            |                  |
|  |           |                  |                |                          |              |                  |            |                  |
|  |           |                  |                |                          |              |                  |            |                  |
|  |           |                  |                |                          |              |                  |            |                  |
| Total DSEs                                     |           |                  | 0.00           | Total DSEs               |              |                  | 0.00       |                  |
| Gross Receipts First G                         | roup      | \$               | 0.00           | Gross Receipts Secon     | d Group      | \$               | 0.00       |                  |
|  |           |                  |                |                          |              |                  |            |                  |
| Base Rate Fee First G                          | roup      | \$               | 0.00           | Base Rate Fee Secon      | d Group      | \$               | 0.00       |                  |
| ONE HUNDRED FIF                                | TY-NINTH  | SUBSCRIBER GRO   | UP             | ONE HUNDRED              | SIXTIETH     | SUBSCRIBER GROU  | JP         |                  |
| COMMUNITY/ AREA                                |           |                  | 0              | COMMUNITY/ AREA          |              |                  | 0          |                  |
| CALL SIGN                                      | DSE       | CALL SIGN        | DSE            | CALL SIGN                | DSE          | CALL SIGN        | DSE        |                  |
|  |           |                  |                |                          |              |                  |            |                  |
|  |           |                  | <u></u>        |                          |              |                  |            |                  |
|  |           |                  | <u></u>        |                          | <u></u>      |                  |            |                  |
|  | <u></u>   |                  | <del></del>    |                          | <u></u>      | -                |            |                  |
|  |           |                  | <u></u>        |                          | <del>-</del> |                  |            |                  |
|  |           |                  |                |                          |              |                  |            |                  |
|  |           |                  |                |                          |              |                  |            |                  |
|  |           |                  |                |                          |              |                  |            |                  |
|  |           |                  |                |                          |              |                  |            |                  |
|  |           |                  | <u></u>        |                          |              | -                |            |                  |
|  |           |                  | <del>.  </del> |                          |              |                  |            |                  |
|  |           |                  | <del>-</del>   |                          |              |                  |            |                  |
|  |           |                  | <u></u>        |                          | <del></del>  |                  |            |                  |
| Total DSEs                                     | -1        |                  | 0.00           | Total DSEs               |              |                  | 0.00       |                  |
| Gross Receipts Third 0                         | Group     | \$               | 0.00           | Gross Receipts Fourth    | Group        | \$               | 0.00       |                  |
|  | r         | ·-               |                |                          |              | ·                |            |                  |
| Base Rate Fee Third G                          | Group     | \$               | 0.00           | Base Rate Fee Fourth     | Group        | \$               | 0.00       |                  |
| Base Rate Fee: Add the Enter here and in block |           |                  | riber group a  | as shown in the boxes ab | oove.        | \$               |            |                  |

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FIRST SUBSCRIBER GROUP SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . THIRD SUBSCRIBER GROUP FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

lf

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

5984

## Nortex Communications Co.

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

Name

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

| If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a |
|---|
| Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined  |
| by section 76.5 of FCC rules in effect on June 24, 1981:  |

First 50 major television market Second 50 major television market

#### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| FIFTH SUBSCRIBER GROUP   | SIXTH SUBSCRIBER GROUP   |
|--|--|
| Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
| Line 2: Enter the Exempt DSEs  | Line 2: Enter the Exempt DSEs  |
| Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation                                | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation                                |
| SYNDICATED EXCLUSIVITY SURCHARGE First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group  |
| SEVENTH SUBSCRIBER GROUP   | EIGHTH SUBSCRIBER GROUP  |
| Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
| Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| SYNDICATED EXCLUSIVITY SURCHARGE Third Group   | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea   | ach authoriber group as shoup  |

ACCOUNTING PERIOD: 2024/1 FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. NINTH SUBSCRIBER GROUP TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . **ELEVENTH SUBSCRIBER GROUP** TWELVTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

EGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

# Name Nortex Communications Co. 5984

# 9

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

| BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY | SURCHARGE FOR EACH SUBSCRIBER GROUP |
|--|-------------------------------------|
|  |                                     |

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| THIRTEENTH SUBSCRIBER GROUP  | FOURTEENTH SUBSCRIBER GROUP  |
|--|--|
| Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs   | Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs   |
| Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  |
| SYNDICATED EXCLUSIVITY SURCHARGE First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group  |
| FIFTEENTH SUBSCRIBER GROUP   | SIXTEENTH SUBSCRIBER GROUP   |
| TH TEENTH SUBSCRIBER GROUP   | SIXTEENTH SUBSCRIBER GROUP   |
| Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
|  | 1 1 1 1  |
| Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs   |
| Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge | 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 |

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

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. SEVENTEENTH SUBSCRIBER GROUP EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . NINEENTH SUBSCRIBER GROUP TWENTYTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

5984

# BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

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

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

#### INSTRUCTIONS:

Nortex Communications Co.

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| TWENTY-FIRST SUBSCRIBER GROUP   | TWENTY-SECOND SUBSCRIBER GROUP  |
|---|---|
| Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs  | Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs  |
| Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| SYNDICATED EXCLUSIVITY SURCHARGE First Group  | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |
| TWENTY-THIRD SUBSCRIBER GROUP   | TWENTY-FOURTH SUBSCRIBER GROUP  |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |
| Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs   |
| Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| SYNDICATED EXCLUSIVITY SURCHARGE Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group   |

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. TWENTY-FIFTH SUBSCRIBER GROUP TWENTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . TWENTY-SEVENTH SUBSCRIBER GROUP TWENTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. TWENTY-NINTH SUBSCRIBER GROUP THIRTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . THIRTY-FIRST SUBSCRIBER GROUP THIRTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. THIRTY-THIRD SUBSCRIBER GROUP THIRTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . THIRTY-FIFTH SUBSCRIBER GROUP THIRTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID# 5984

LEGAL NAME OF OWNER OF CABLE SYSTEM: Name Nortex Communications Co.

### BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

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

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

First 50 major television market Second 50 major television market

### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| THIRTY-SEVENTH SUBSCRIBER GROUP   | THIRTY-EIGHTH SUBSCRIBER GROUP   |
|---|--|
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| SYNDICATED EXCLUSIVITY SURCHARGE First Group  | SYNDICATED EXCLUSIVITY SURCHARGE Second Group  |
| THIRTY-NINTH SUBSCRIBER GROUP   | FORTIETH SUBSCRIBER GROUP  |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs   |
| Line 2: Enter the Exempt DSEs.  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation                             |
| SYNDICATED EXCLUSIVITY SURCHARGE Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FORTY-FIRST SUBSCRIBER GROUP FORTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . FORTY-THIRD SUBSCRIBER GROUP FORTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

EGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Name

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FORTY-FIFTH SUBSCRIBER GROUP FORTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . FORTY-SEVENTH SUBSCRIBER GROUP FORTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20.

EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984

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

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. FORTY-NINTH SUBSCRIBER GROUP FIFTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . FIFTY-FIRST SUBSCRIBER GROUP FIFTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

EGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Name

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

Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. FIFTY-THIRD SUBSCRIBER GROUP FIFTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . FIFTY-FIFTH SUBSCRIBER GROUP FIFTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

ACCOUNTING PERIOD: 2024/1 FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. FIFTY-SEVENTH SUBSCRIBER GROUP FIFTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . FIFTY-NINTH SUBSCRIBER GROUP SIXTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. SIXTY-FIRST SUBSCRIBER GROUP SIXTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . SIXTY-THIRD SUBSCRIBER GROUP SIXTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. SIXTY-NINTH SUBSCRIBER GROUP SEVENTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . SEVENTY-FIRST SUBSCRIBER GROUP SEVENTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

EGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Name

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

Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. SEVENTY-THIRD SUBSCRIBER GROUP SEVENTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . Second Group . . . . . . . . . . . . SEVENTY-FIFTH SUBSCRIBER GROUP SEVENTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

# Nortex Communications Co. SYSTEM ID#

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

| ^ |
|---|
| ч |
| J |
| _ |

Name

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

| If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a |
|---|
| Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined  |
| by section 76.5 of FCC rules in effect on June 24, 1981:  |

☐ First 50 major television market ☐ Second 50 major television market

#### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| 11   |
|--|
| SEVENTY-EIGHTH 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  SYNDICATED EXCLUSIVITY SURCHARGE Second Group |
| EIGHTIETH 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  |
| SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |
|  |

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

5984

Nortex Communications Co.

В

#### BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

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

Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

☐ First 50 major television market ☐ Second 50 major television market

#### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| EIGHTY-FIRST SUBSCRIBER GROUP  | EIGHTY-SECOND 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 | Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| SYNDICATED EXCLUSIVITY SURCHARGE First Group   | SYNDICATED EXCLUSIVITY SURCHARGE Second Group  |
| EIGHTY-THIRD SUBSCRIBER GROUP  | EIGHTY-FOURTH 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 | Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| SYNDICATED EXCLUSIVITY SURCHARGE Third Group   | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group  |
|  |  |

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

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. EIGHTY-FIFTH SUBSCRIBER GROUP EIGHTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . EIGHTY-SEVENTH SUBSCRIBER GROUP EIGHTY-EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

| Name   | Nortex Communications Co.   | 5984  |
|--|---|---|
|  | BLOCK B: COMPUTATION OF SYNDICATED EXCLUS   | VITY SURCHARGE FOR EACH SUBSCRIBER GROUP  |
| Gomputation of Base Rate Fee and Syndicated Exclusivity Surcharge for Partially Distant Stations | If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:    First 50 major television market   Second 50 major television market |   |
|  | EIGHTY-NINTH SUBSCRIBER GROUP   | NINETIETH SUBSCRIBER GROUP  |
|  | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |
|  | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs   |
|  | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation   | 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 |
|  | NINETY-FIRST SUBSCRIBER GROUP   | NINETY-SECOND SUBSCRIBER GROUP  |
|  | Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |
|  | Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs.  |
|  | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation   | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
|  | SYNDICATED EXCLUSIVITY SURCHARGE Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group   |
|  | SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ea in the boxes above. Enter here and in block 4, line 2 of space L (page 7   |   |
|  |   |   |

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984

# BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

Computation Base Rate Fee and **Syndicated Exclusivity** Surcharge for Partially Distant Stations

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge, Indicate which major television market any nortion of your cable system is located in as defined

| by section 76.5 of FCC rules in effect on June 24, 1981:  | et any portion of your cable system is located in as defined   |
|---|--|
| ☐ First 50 major television market  | ☐ Second 50 major television market                            |
| Step 1: In line 1, give the total DSEs by subscriber group for commerce this schedule.  | sial VHF Grade B contour stations listed in block A, part 9 of |
| Step 2: In line 2, give the total number of DSEs by subscriber group for Exempt DSEs in block C, part 7 of this schedule. If none enter                                     |  |
| <ul><li>Step 3: In line 3, subtract line 2 from line 1. This is the total number of</li><li>Step 4: Compute the surcharge for each subscriber group using the for</li></ul> | DSEs used to compute the surcharge.                            |
| NINETY-THIRD SUBSCRIBER GROUP   | NINETY-FOURTH SUBSCRIBER GROUP                                 |
|   |  |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs                                     |
| Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs                                  |
| Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1                            |
| and enter here. This is the   | and enter here. This is the                                    |
| total number of DSEs for  | total number of DSEs for                                       |
| this subscriber group   | this subscriber group  |
| subject to the surcharge  | subject to the surcharge                                       |
| computation   | computation  |
| SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY   |
| SURCHARGE   | SURCHARGE  |
| First Group   | Second Group   |
| NINETY-FIFTH SUBSCRIBER GROUP   | NINETY-SIXTH SUBSCRIBER GROUP                                  |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs                                     |
| Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs                                  |
| Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1                            |
| and enter here. This is the   | and enter here. This is the                                    |
| total number of DSEs for  | total number of DSEs for                                       |
| this subscriber group   | this subscriber group  |
| subject to the surcharge  | subject to the surcharge                                       |
| computation   | computation  |
| SYNDICATED EXCLUSIVITY  | SYNDICATED EXCLUSIVITY   |
| SURCHARGE   | SURCHARGE  |
| Third Group   | Fourth Group   |
|   |  |

SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

SYSTEM ID#

5984

## BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

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

| If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a |
|---|
| Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined  |
| by section 76.5 of FCC rules in effect on June 24, 1981:  |

☐ First 50 major television market ☐ Second 50 major television market

#### INSTRUCTIONS:

Nortex Communications Co.

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| NINETY-SEVENTH SUBSCRIBER GROUP   | NINETY-EIGHTH SUBSCRIBER GROUP  |
|---|---|
| Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs   | Line 1: Enter the VHF DSEs Line 2: Enter the Exempt DSEs  |
| Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| SYNDICATED EXCLUSIVITY SURCHARGE First Group  | SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |
| NINETY-NINTH SUBSCRIBER GROUP   | ONE HUNDREDTH SUBSCRIBER GROUP  |
| Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs   | Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs   |
| Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation | Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation |
| SYNDICATED EXCLUSIVITY SURCHARGE Third Group  | SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group   |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for ear in the boxes above. Enter here and in block 4, line 2 of space L (page 7                |   |

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDERED FIRST SUBSCRIBER GROUP ONE HUNDERED SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . ONE HUNDERED FOURTH SUBSCRIBER GROUP ONE HUNDERED THIRD SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED FIFTH SUBSCRIBER GROUP ONE HUNDRED SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . ONE HUNDRED SEVENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED NINTH SUBSCRIBER GROUP ONE HUNDRED TENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . ONE HUNDRED TWELVTH SUBSCRIBER GROUP ONE HUNDRED ELEVENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation of First 50 major television market Second 50 major television market INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for Partially Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this Distant schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . . . . ONE HUNDRED NINTEENTH SUBSCRIBER GROUP ONE HUNDRED TWENTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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Partially

Distant

Stations

FORM SA3E. PAGE 20. EGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984

BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

#### If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: Computation First 50 major television market Second 50 major television market of INSTRUCTIONS: Base Rate Fee Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of and Syndicated this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as **Exclusivity** Surcharge Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. for

your actual calculations on this form.

Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this

schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show

ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP ONE HUNDRED THIRTIETH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE 

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

SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown

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Name Name OF OWNER OF CABLE SYSTEM:

Nortex Communications Co.

SYSTEM ID#

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

5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form. ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . . . ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

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Name

EGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Nortex Communications Co.

5984

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

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

Nortex Communications Co.

SYSTEM ID#

5984

### BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

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

| If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a |
|---|
| Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined  |
| by section 76.5 of FCC rules in effect on June 24, 1981:  |

☐ First 50 major television market ☐ Second 50 major television market

#### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| ONE HUNDRED FORTY-SIXTH 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 |
| SYNDICATED EXCLUSIVITY SURCHARGE Second Group   |
| ONE HUNDRED FORTY-EIGHTH 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 |
| SYNDICATED EXCLUSIVITY SURCHARGE Fourth Group   |
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SYSTEM ID#

5984

Nortex Communications Co.

#### BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

9

Name

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

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981:

First 50 major television market Second 50 major television market

#### INSTRUCTIONS:

- Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule.
- Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero.
- Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge.
- Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show your actual calculations on this form.

| ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP   | ONE HUNDRED FIFTIETH SUBSCRIBER GROUP  |
|--|--|
| Line 1: Enter the VHF DSEs   | Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 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   |
| SYNDICATED EXCLUSIVITY SURCHARGE First Group   | computation  |
| ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP   | ONE HUNDRED FIFTY-SECOND 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 | Line 1: Enter the VHF DSEs  Line 2: Enter the Exempt DSEs  Line 3: Subtract line 2 from line 1 and enter here. This is the total number of DSEs for this subscriber group subject to the surcharge computation  SYNDICATED EXCLUSIVITY SURCHARGE |
| Third Group  | Fourth Group   |
| in the boxes above. Enter here and in block 4, line 2 of space L (page 7   |  |

SYSTEM ID#

Nortex Communications Co.

Computation of Base Rate Fee and Syndicated **Exclusivity** Surcharge for Partially Distant

Name 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a Syndicated Exclusivity Surcharge. Indicate which major television market any portion of your cable system is located in as defined by section 76.5 of FCC rules in effect on June 24, 1981: First 50 major television market Second 50 major television market INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of this schedule. Step 2: In line 2, give the total number of DSEs by subscriber group for the VHF Grade B contour stations that were classified as Exempt DSEs in block C, part 7 of this schedule. If none enter zero. Step 3: In line 3, subtract line 2 from line 1. This is the total number of DSEs used to compute the surcharge. Step 4: Compute the surcharge for each subscriber group using the formula outlined in block D, section 3 or 4 of part 7 of this schedule. In making this computation, use gross receipts figures applicable to the particular group. You do not need to show Stations your actual calculations on this form. ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . . . Line 1: Enter the VHF DSEs . . . . . Line 2: Enter the Exempt DSEs . . . . Line 2: Enter the Exempt DSEs . . . . . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY **SURCHARGE** SURCHARGE First Group . . . . . . . . . . . . . . . . Second Group . . . . . . . . . . . ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP Line 1: Enter the VHF DSEs . . . . Line 1: Enter the VHF DSEs . . . . Line 2: Enter the Exempt DSEs. . Line 2: Enter the Exempt DSEs. . Line 3: Subtract line 2 from line 1 Line 3: Subtract line 2 from line 1 and enter here. This is the and enter here. This is the total number of DSEs for total number of DSEs for this subscriber group this subscriber group subject to the surcharge subject to the surcharge computation . . . . . . . . . . . . . . . . computation . . . . . . . . . . . . . . . . SYNDICATED EXCLUSIVITY SYNDICATED EXCLUSIVITY SURCHARGE SURCHARGE SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for each subscriber group as shown 

FORM SA3E. PAGE 20. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name Nortex Communications Co. 5984 BLOCK B: COMPUTATION OF SYNDICATED EXCLUSIVITY SURCHARGE FOR EACH SUBSCRIBER GROUP

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

If your cable system is located within a top 100 television market and the station is not exempt in Part 7, you must also compute a

| First 50 major television market  | Second 50 major television market   |  |  |  |
|---|---|--|--|--|
| INSTRUCTIONS: Step 1: In line 1, give the total DSEs by subscriber group for commercial VHF Grade B contour stations listed in block A, part 9 of |   |  |  |  |
| this schedule.  Step 2: In line 2, give the total number of DSEs by subscriber group  Figure 2 DSEs in black Coast 7 of this schedule. If page 2  |   |  |  |  |
| Exempt DSEs in block C, part 7 of this schedule. If none er<br>Step 3: In line 3, subtract line 2 from line 1. This is the total number           |   |  |  |  |
| <b>Step 4:</b> Compute the surcharge for each subscriber group using the  | e formula outlined in block D, section 3 or 4 of part 7 of this gures applicable to the particular group. You do not need to show |  |  |  |
| your actual calculations on this form.  | guies applicable to the particular group. You do not need to show   |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |
| ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP  | ONE HUNDRED FIFTY-EIGHTH SUBSCRIBER GROUP   |  |  |  |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |  |  |  |
| Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs   |  |  |  |
| Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1   |  |  |  |
| and enter here. This is the   | and enter here. This is the   |  |  |  |
| total number of DSEs for  | total number of DSEs for  |  |  |  |
| this subscriber group   | this subscriber group   |  |  |  |
| subject to the surcharge computation  | subject to the surcharge computation  |  |  |  |
|   |   |  |  |  |
| SYNDICATED EXCLUSIVITY SURCHARGE  | SYNDICATED EXCLUSIVITY SURCHARGE  |  |  |  |
| First Group \$  | Second Group  |  |  |  |
|   |   |  |  |  |
| ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP  | ONE HUNDRED SIXTIETH SUBSCRIBER GROUP   |  |  |  |
| Line 1: Enter the VHF DSEs  | Line 1: Enter the VHF DSEs  |  |  |  |
| Line 2: Enter the Exempt DSEs   | Line 2: Enter the Exempt DSEs   |  |  |  |
| Line 3: Subtract line 2 from line 1   | Line 3: Subtract line 2 from line 1   |  |  |  |
| and enter here. This is the   | and enter here. This is the   |  |  |  |
| total number of DSEs for  | total number of DSEs for  |  |  |  |
| this subscriber group subject to the surcharge  | this subscriber group subject to the surcharge  |  |  |  |
| computation   | computation   |  |  |  |
|   |   |  |  |  |
| SYNDICATED EXCLUSIVITY SURCHARGE  | SYNDICATED EXCLUSIVITY SURCHARGE  |  |  |  |
| Third Group \$  | Fourth Group \$   |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |
| SYNDICATED EXCLUSIVITY SURCHARGE: Add the surcharge for   | r each subscriber group as shown ge 7)  |  |  |  |

| Cable Worksheet                     |  | Total amount of remittance           | Number of SAs I           | rec'd Initials  |  |  |
|-------------------------------------|--|--------------------------------------|---------------------------|-----------------|--|--|
|                                     |  | Date of remittance                   | Check □ EFT               | ☐ FILING FEES   |  |  |
| Cable ID #                          |  |                                      |                           | Amount Initials |  |  |
| Examined by                         | Reviewed by  | Date examination completed           | Allocation number         |                 |  |  |
| Space A<br>Accounting               | (enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces) |                                      |                           |                 |  |  |
| Period                              | □ Letter sent □ Information received   |                                      |                           |                 |  |  |
|                                     | ☐ Accepted   | ☐ Accepted ☐ Phone call/Date/Contact |                           |                 |  |  |
| Space B<br>Owner                    |  |                                      |                           |                 |  |  |
|                                     | ☐ Letter sent  | [                                    | ☐ Information received    |                 |  |  |
|                                     | ☐ Accepted   |                                      | ☐ Phone call/Date/Contact |                 |  |  |
| Space D<br>Area Served              |  |                                      |                           |                 |  |  |
|                                     | ☐ Letter sent  | [                                    | ☐ Information received    |                 |  |  |
|                                     | ☐ Accepted   | [                                    | ☐ Phone call/Date/Contact |                 |  |  |
| Space E<br>Secondary<br>Transission |  |                                      |                           |                 |  |  |
| Service<br>Subscribers:             | ☐ Letter sent ☐ Information received   |                                      |                           |                 |  |  |
| and Rates                           | ☐ Accepted ☐ Phone call/Date/Contact   |                                      |                           |                 |  |  |
| Space G<br>Primary<br>Transmitters: |  |                                      |                           |                 |  |  |
| Television                          | ☐ Letter sent  | I                                    | ☐ Information received    |                 |  |  |
|                                     | ☐ Accepted   | I                                    | ☐ Phone call/Date/Contact |                 |  |  |
| Space H<br>Primary<br>Transmitters: |  |                                      |                           |                 |  |  |
| Radio                               | ☐ Accepted   |                                      | ☐ Phone call/Date/Contact |                 |  |  |

Space I Substitute

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