

This form is effective beginning with the July 1 to December 30, 2025, accounting period (2025/2).
If you are filing for a prior accounting period, contact the Licensing Section for the correct form.

**SA3E
Long Form**

STATEMENT OF ACCOUNT
*for Secondary Transmissions by
Cable Systems (Long Form)*

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

FOR COPYRIGHT OFFICE USE ONLY	
DATE RECEIVED	AMOUNT
3/17/2026	\$
	ALLOCATION NUMBER

Return completed workbook by
email to

coplicsoa@copyright.gov

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

A Accounting Period	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: 2015/2																							
B Owner	INSTRUCTIONS: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the subsidiary's name and the corporate title of the subsidiary, not that of the parent corporation. List any other name or names under which the owner conducts the business of the cable system. If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period. ☐ Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Section. LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM Shrewsbury Community Cablevision 100 Maple Ave Shrewsbury, MA 01545 LICENSING SECTION Digitally signed by Date: 2026.03.20 14:12:01 -04'00' 14007 14007 2015/2																							
C System	INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.																							
	1	IDENTIFICATION OF CABLE SYSTEM: SELCO, Shrewsbury Electric & Cable Operations																						
	2	MAILING ADDRESS OF CABLE SYSTEM: (Number, street, rural route, apartment, or suite number) (City, town, state, zip code)																						
D Area Served First Community Sample	INSTRUCTIONS: For complete space D instructions, see page 1b. Identify only the first community served below and relist on page 1b with all communities. <table><tr><td>CITY OR TOWN</td><td>STATE</td></tr><tr><td>Shrewsbury</td><td>MA</td></tr></table> Below is a sample for reporting communities if you report multiple channel line-ups in Space G. <table><tr><td>CITY OR TOWN (SAMPLE)</td><td>STATE</td><td>CH LINE UP</td><td>SUB GRP#</td></tr><tr><td>Alda</td><td>MD</td><td>A</td><td>1</td></tr><tr><td>Alliance</td><td>MD</td><td>B</td><td>2</td></tr><tr><td>Gering</td><td>MD</td><td>B</td><td>3</td></tr></table>				CITY OR TOWN	STATE	Shrewsbury	MA	CITY OR TOWN (SAMPLE)	STATE	CH LINE UP	SUB GRP#	Alda	MD	A	1	Alliance	MD	B	2	Gering	MD	B	3
CITY OR TOWN	STATE																							
Shrewsbury	MA																							
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Alliance	MD	B	2																					
Gering	MD	B	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.

[illegible]

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

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AA

[illegible]

G

Primary Transmitters: Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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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.

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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 identified.

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CHANNEL LINE-UP AB

[illegible]

G

Primary Transmitters:
Television

U.S. Copyright Office

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

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.

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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.

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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.

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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 identified.

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CHANNEL LINE-UP AD

[illegible]

G

Primary Transmitters:
Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name _____

PRIMARY TRANSMITTERS: TELEVISION

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CHANNEL LINE-UP AE

[illegible]

G

Primary Transmitters:
Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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CHANNEL LINE-UP AF

[illegible]

G

Primary Transmitters: Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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CHANNEL LINE-UP AG

[illegible]

G

Primary Transmitters: Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AH

[illegible]

G

Primary Transmitters: Television

U.S. Copyright Office

U.S. Copyright Office

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

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

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

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

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

Column 6: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AK

[illegible]

G

Primary Transmitters:
Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP ALL

[illegible]

G

Primary Transmitters:
Television

U.S. Copyright Office

U.S. Copyright Office

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AO

[illegible]

G

Primary Transmitters: Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AP

[illegible]

G

Primary Transmitters: Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AQ

[illegible]

G

Primary Transmitters: Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AR

[illegible]

G

Primary Transmitters: Television

U.S. Copyright Office

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AT

[illegible]

G

Primary Transmitters:
Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AU

[illegible]

G

Primary Transmitters:
Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AV

[illegible]

G

Primary Transmitters: Television

Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

PRIMARY TRANSMITTERS: TELEVISION

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

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

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis.
- List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions located in the paper SA3 form.

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

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

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "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 identified.

Note: If you are utilizing multiple channel line-ups, use a separate space G for each channel line-up.

CHANNEL LINE-UP AW

[illegible]

Form SA3E Long Form (Rev. 05-17)

Form SA3E Long Form (Rev. 05-17)

Form SA3E Long Form (Rev. 05-17)

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision		SYSTEM ID# 14007	Name
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.			K Gross Receipts
IMPORTANT: You must complete a statement in space P concerning gross receipts. \$ 797,643.00 (Amount of gross receipts)			
COPYRIGHT ROYALTY FEE Instructions: Use the blocks in this space L to determine the royalty fee you owe: • Complete block 1, showing your minimum fee. • Complete block 2, showing whether your system carried any distant television stations. • If your system did not carry any distant television stations, leave block 3 blank. Enter the amount of the minimum fee from block 1 on line 1 of block 4, and calculate the total royalty fee. • If your system did carry any distant television stations, you must complete the applicable parts of the DSE Schedule accompanying this form and attach the schedule to your statement of account. ▶ If part 8, block A, of the DSE schedule was completed, the base rate fee should be entered on line 1 of block 3 below. ▶ If part 6 of the DSE schedule was completed, the amount from line 7 of block C should be entered on line 2 in block 3 below.			L Copyright Royalty Fee
Block 1	MINIMUM FEE: All cable systems with semiannual gross receipts of \$527,600 or more are required to pay at least the minimum fee, regardless of whether they carried any distant stations. This fee is 1.064 percent of the system's gross receipts for the accounting period. Line 1. Enter the amount of gross receipts from space K. \$ 797,643.00 Line 2. Multiply the amount in line 1 by 0.01064. Enter the result here. This is your minimum fee. \$ 8,486.92		
Block 2	DISTANT TELEVISION STATIONS CARRIED: Your answer here must agree with the information you gave in space G. If, in space G, you identified any stations as "distant" by stating "Yes" in column 4, you must check "Yes" in this block. • Did your cable system carry any distant television stations during the accounting period? ☐ Yes—Complete the DSE schedule. ☒ No—Leave block 3 below blank and complete line 1, block 4.		
Block 3	Line 1. BASE RATE FEE: Enter the base rate fee from either part 7, section 3 or 4, or part 8, block A of the DSE schedule. If none, enter zero. \$ - Line 2. 3.75 Fee: Enter the total fee from line 7, block C, part 6 of the DSE schedule. If none, enter zero. 0.00 Line 3. Add lines 1 and 2 and enter here. \$ -		
Block 4	Line 1. BASE RATE FEE/3.75 FEE or MINIMUM FEE: Enter either the minimum fee from block 1 or the sum of the base rate fee / 3.75 fee from block 3, line 3, whichever is larger. \$ 8,486.92 Line 2. INTEREST CHARGE: Enter the amount from line 4, space Q, page 9 (Interest Worksheet) 0.00 Line 3. FILING FEE. \$ 725.00 TOTAL ROYALTY AND FILING FEES DUE FOR ACCOUNTING PERIOD. Add Lines 1, 2 and 3 of block 4 and enter total here \$ 9,211.92 EFT Trace # or TRANSACTION ID # Remit this amount via electronic payment payable to Register of Copyrights. (See Circular 74 for more information)		

Cable systems submitting additional deposits under Section 111(d)(7) should contact the Licensing Section for the appropriate form for submitting the additional fees.

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: Shrewsbury Community Cablevision		SYSTEM ID# 14007	Name
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." 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? ☒ NO ☐ YES. Enter the total here and list the satellite carrier(s) below. \$		P Special Statement Concerning Gross Receipts Exclusion	
Name		Name	
Mailing Address		Mailing Address	
INTEREST ASSESSMENTS You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions in the paper SA3 form. Line 1 Enter the amount of late payment or underpayment \$ - x 1% Line 2 Multiply line 1 by the interest rate* and enter the sum here - x 200 days Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L (page 7) \$ - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, accounting period, and ID number as given in the original filing. Owner Address First community served Accounting period ID number		Q Interest Assessment	

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.

Add rows as necessary.
Remember to copy all formula into new rows.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision					SYSTEM ID# 14007
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3	Computation of DSEs for Stations Carried Part Time Due to Lack of Activated Channel Capacity	Instructions: CAPACITY Column 1: List the call sign of all distant stations identified by "LAC" in column 5 of space G (page 3). Column 2: For each station, give the number of hours your cable system carried the station during the accounting period. This figure should correspond with the information given in space J. Calculate only one DSE for each station. Column 3: For each station, give the total number of hours that the station broadcast over the air during the accounting period. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in decimals in column 4. This figure must be carried out at least to the third decimal point. This is the "basis of carriage value" for the station. Column 5: For each independent station, give the "type-value" as "1.0." For each network or noncommercial educational station, give the type-value as ".25." Column 6: Multiply the figure in column 4 by the figure in column 5, and give the result in column 6. Round to no less than the third decimal point. This is the station's DSE. (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form.			
CATEGORY LAC STATIONS: COMPUTATION OF DSEs					
1. CALL SIGN	2. NUMBER OF HOURS CARRIED BY SYSTEM	3. NUMBER OF HOURS STATION ON AIR	4. BASIS OF CARRIAGE VALUE	5. TYPE VALUE	6. DSE
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
	÷	=		x	=
SUM OF DSEs OF CATEGORY LAC STATIONS: Add the DSEs of each station. Enter the sum here and in line 2 of part 5 of this schedule, ...▶					
					0.00

4	Computation of DSEs for Substitute-Basis Stations	Instructions: Column 1: Give the call sign of each station listed in space I (page 5, the Log of Substitute Programs) if that station: • Was carried by your system in substitution for a program that your system was permitted to delete under FCC rules and regulations in effect on October 19, 1976 (as shown by the letter "P" in column 7 of space I); and • Broadcast one or more live, nonnetwork programs during that optional carriage (as shown by the word "Yes" in column 2 of space I). Column 2: For each station give the number of live, nonnetwork programs carried in substitution for programs that were deleted at your option. This figure should correspond with the information in space I. Column 3: Enter the number of days in the calendar year: 365, except in a leap year. Column 4: Divide the figure in column 2 by the figure in column 3, and give the result in column 4. Round to no less than the third decimal point. This is the station's DSE (For more information on rounding, see page (viii) of the general instructions in the paper SA3 form).					
SUBSTITUTE-BASIS STATIONS: COMPUTATION OF DSEs							
1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE	1. CALL SIGN	2. NUMBER OF PROGRAMS	3. NUMBER OF DAYS IN YEAR	4. DSE
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
	÷	=			÷	=	
SUM OF DSEs OF SUBSTITUTE-BASIS STATIONS: Add the DSEs of each station. Enter the sum here and in line 3 of part 5 of this schedule, ...▶							
							0.00

5	Total Number of DSEs	TOTAL NUMBER OF DSEs: Give the amounts from the boxes in parts 2, 3, and 4 of this schedule and add them to provide the total number of DSEs applicable to your system. 1. Number of DSEs from part 2 ● _____ ▶ 0.00 2. Number of DSEs from part 3 ● _____ ▶ 0.00 3. Number of DSEs from part 4 ● _____ ▶ 0.00 TOTAL NUMBER OF DSEs _____ ▶ 0.00
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LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007			Name
Instructions: Block A must be completed. In block A: • If your answer if "Yes," leave the remainder of part 6 and part 7 of the DSE schedule blank and complete part 8, (page 16) of the schedule. • If your answer if "No," complete blocks B and C below.									6 Computation of 3.75 Fee
BLOCK A: TELEVISION MARKETS									
Is the cable system located wholly outside of all major and smaller markets as defined under section 76.5 of FCC rules and regulations in effect on June 24, 1981? ☐ Yes—Complete part 8 of the schedule—DO NOT COMPLETE THE REMAINDER OF PART 6 AND 7. ☒ No—Complete blocks B and C below.									
BLOCK B: CARRIAGE OF PERMITTED DSEs									
Column 1: CALL SIGN List the call signs of distant stations listed in part 2, 3, and 4 of this schedule that your system was permitted to carry under FCC rules and regulations prior to June 25, 1981. For further explanation of permitted stations, see the instructions for the DSE Schedule. (Note: The letter M below refers to an exempt multicast stream as set forth in the Satellite Television Extension and Localism Act of 2010.) Column 2: BASIS OF PERMITTED CARRIAGE Enter the appropriate letter indicating the basis on which you carried a permitted station. (Note the FCC rules and regulations cited below pertain to those in effect on June 24, 1981.) 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)] 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 Noncommercial educational station [76.59(c), 76.61(d), 76.63(a) referring to 76.61(d)] D Grandfathered station (76.65) (see paragraph regarding substitution of grandfathered stations in the instructions for DSE schedule). E Carried pursuant to individual waiver of FCC rules (76.7) *F A station previously carried on a part-time or substitute basis prior to June 25, 1981 M Retransmission of a distant multicast stream. Column 3: List the DSE for each distant station listed in parts 2, 3, and 4 of the schedule. *(Note: For those stations identified by the letter "F" in column 2, you must complete the worksheet on page 14 of this schedule to determine the DSE.)									
1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	1. CALL SIGN	2. PERMITTED BASIS	3. DSE	
							0.00		
BLOCK C: COMPUTATION OF 3.75 FEE									
Line 1: Enter the total number of DSEs from part 5 of this schedule -									
Line 2: Enter the sum of permitted DSEs from block B above -									
Line 3: Subtract line 2 from line 1. This is the total number of DSEs subject to the 3.75 rate. (If zero, leave lines 4–7 blank and proceed to part 7 of this schedule)							0.00 0.00		
Line 4: Enter gross receipts from space K (page 7)							x 0.0375		
Line 5: Multiply line 4 by 0.0375 and enter sum here							x		
Line 6: Enter total number of DSEs from line 3							-		
Line 7: Multiply line 6 by line 5 and enter here and on line 2, block 3, space L (page 7)							0.00		

[illegible]

Copyright Office Form SA3E Long Form (Rev. 0

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision		SYSTEM ID# 14007
7 Computation of Base Rate Fee	Instructions: You must complete this part of the DSE schedule for the SUM OF PERMITTED DSEs in part 6, block B; however, if block A of part 6 was checked "Yes," use the total number of DSEs from part 5. • In block A, indicate, by checking "Yes" or "No," whether your system carried any partially distant stations. • If your answer is "No," compute your system's base rate fee in block B. Leave part 8 blank. • If your answer is "Yes" (that is, if you carried one or more partially distant stations), you must complete part 8. Leave block B below blank. What is a partially distant station? A station is "partially distant" if, at the time your system carried it, some of your subscribers were located within that station's local service area and others were located outside that area. For the definition of a station's "local service area," see page (v) of the general instructions.		
	BLOCK A: CARRIAGE OF PARTIALLY DISTANT STATIONS		
	• Did your cable system retransmit the signals of any partially distant television stations during the accounting period? ☒ Yes—Complete part 8 of this schedule. ☐ No—Complete the following sections.		
	BLOCK B: NO PARTIALLY DISTANT STATIONS—COMPUTATION OF BASE RATE FEE		
Section 1	Enter the amount of gross receipts from space K (page 7). ▶ \$ _____		
Section 2	Enter the total number of permitted DSEs from block B, part 6 of this schedule. (If block A of part 6 was checked "Yes," use the total number of DSEs from part 5.). ▶ _____		
Section 3	If the figure in section 2 is 4.000 or less, compute your base rate fee here and leave section 4 blank. NOTE: If the DSE is 1.0 or less, multiply the gross receipts by 0.01064 by the DSE. Enter the result on line A below. A. Enter 0.01064 of gross receipts (the amount in section 1). ▶ \$ _____ B. Enter 0.00701 of gross receipts (the amount in section 1). ▶ _____ C. Subtract 1.000 from total DSEs (the figure in section 2) and enter here. ▶ _____ - D. Multiply line B by line C and enter here. ▶ \$ _____ E. Add lines A and D. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee. ▶ \$. 0.00		

LEGAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#	Name
Shrewsbury Community Cablevision		14007	

Section 4	If the figure in section 2 is more than 4,000, compute your base rate fee here and leave section 3 blank. A. Enter 0.01064 of gross receipts (the amount in section 1) ▶ \$ _____ B. Enter 0.00701 of gross receipts (the amount in section 1) ▶ \$ _____ C. Multiply line B by 3.000 and enter here ▶ \$ _____ D. Enter 0.00330 of gross receipts (the amount in section 1) ▶ \$ _____ E. Subtract 4.000 from total DSEs (the figure in section 2) and enter here ▶ _____ F. Multiply line D by line E and enter here ▶ \$ _____ G. Add lines A, C, and F. This is your base rate fee. Enter here and in block 3, line 1, space L (page 7) Base Rate Fee ▶ \$ 0.00	7 Computation of Base Rate Fee
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IMPORTANT: It is no longer necessary to report television signals on a system-wide basis. Carriage of television broadcast signals shall instead be reported on a community-by-community basis (subscriber groups) if the cable system reported multiple channel line-ups in Space G. In General: If any of the stations you carried were partially distant, the statute allows you, in computing your base rate fee, to exclude receipts from subscribers located within the station's local service area, from your system's total gross receipts. To take advantage of this exclusion, you must: First: Divide all of your subscribers into subscriber groups, each group consisting entirely of subscribers that are distant to the same station or the same group of stations. Next: Treat each subscriber group as if it were a separate cable system. Determine the number of DSEs and the portion of your system's gross receipts attributable to that group, and calculate a separate base rate fee for each group. Finally: Add up the separate base rate fees for each subscriber group. That total is the base rate fee for your system. NOTE: If any portion of your cable system is located within the top 100 television market and the station is not exempt in part 7, you must also compute a Syndicated Exclusivity Surcharge for each subscriber group. In this case, complete both block A and B below. However, if your cable system is wholly located outside all major television markets, complete block A only. How to Identify a Subscriber Group for Partially Distant Stations Step 1: For each community served, determine the local service area of each wholly distant and each partially distant station you carried to that community. Step 2: For each wholly distant and each partially distant station you carried, determine which of your subscribers were located outside the station's local service area. A subscriber located outside the local service area of a station is distant to that station (and, by the same token, the station is distant to the subscriber.) Step 3: Divide your subscribers into subscriber groups according to the complement of stations to which they are distant. Each subscriber group must consist entirely of subscribers who are distant to exactly the same complement of stations. Note that a cable system will have only one subscriber group when the distant stations it carried have local service areas that coincide. Computing the base rate fee for each subscriber group: Block A contains separate sections, one for each of your system's subscriber groups. In each section: • Identify the communities/areas represented by each subscriber group. • Give the call sign for each of the stations in the subscriber group's complement—that is, each station that is distant to all of the subscribers in the group. • If: 1) your system is located wholly outside all major and smaller television markets, give each station's DSE as you gave it in parts 2, 3, and 4 of this schedule; or, 2) any portion of your system is located in a major or smaller television market, give each station's DSE as you gave it in block B, part 6 of this schedule. • Add the DSEs for each station. This gives you the total DSEs for the particular subscriber group. • Calculate gross receipts for the subscriber group. For further explanation of gross receipts see page (vii) of the general instructions in the paper SA3 form. • Compute a base rate fee for each subscriber group using the formula outline in block B of part 8 of this schedule on the preceding page. In making this computation, use the DSE and gross receipts figure applicable to the particular subscriber group (that is, the total DSEs for that group's complement of stations and total gross receipts from the subscribers in that group). You do not need to show your actual calculations on the form.	8 Computation of Base Rate Fee for Partially Distant Stations, and for Partially Permitted Stations
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LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIRST SUBSCRIBER GROUP					SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
THIRD SUBSCRIBER GROUP					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			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ 0.00	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIFTH SUBSCRIBER GROUP					SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
SEVENTH SUBSCRIBER GROUP					EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
NINTH SUBSCRIBER GROUP					TENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
ELEVENTH SUBSCRIBER GROUP					TWELVTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
THIRTEENTH SUBSCRIBER GROUP					FOURTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
FIFTEENTH SUBSCRIBER GROUP					SIXTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ 	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of Base Rate Fee for Partially Distant Stations
SEVENTEENTH SUBSCRIBER GROUP				EIGHTEENTH 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 First Group \$ 0.00				Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second Group \$ 0.00				
NINETEENTH SUBSCRIBER GROUP				TWENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs 0.00				Total DSEs 0.00				
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00				
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00				
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
TWENTY-FIRST SUBSCRIBER GROUP					TWENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
TWENTY-THIRD SUBSCRIBER GROUP					TWENTY-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			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of Base Rate Fee for Partially Distant Stations
TWENTY-FIFTH SUBSCRIBER GROUP				TWENTY-SIXTH 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 First Group \$ 0.00				Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second Group \$ 0.00				
TWENTY-SEVENTH SUBSCRIBER GROUP				TWENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs 0.00				Total DSEs 0.00				
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00				
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00				
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name			
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP											
TWENTY-NINTH SUBSCRIBER GROUP					THIRTIETH 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 First Group				\$ 0.00		Gross Receipts Second Group				\$ 0.00	
Base Rate Fee First Group				\$ 0.00		Base Rate Fee Second Group				\$ 0.00	
THIRTY-FIRST SUBSCRIBER GROUP					THIRTY-SECOND SUBSCRIBER GROUP						
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0						
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs				0.00		Total DSEs				0.00	
Gross Receipts Third Group				\$ 0.00		Gross Receipts Fourth Group				\$ 0.00	
Base Rate Fee Third Group				\$ 0.00		Base Rate Fee Fourth Group				\$ 0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)											

8

Computation
of
Base Rate Fee
for
Partially
Distant
Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
THIRTY-THIRD SUBSCRIBER GROUP					THIRTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
THIRTY-FIFTH SUBSCRIBER GROUP					THIRTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
THIRTY-SEVENTH SUBSCRIBER GROUP					THIRTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
THIRTY-NINTH SUBSCRIBER GROUP					FORTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

Form SA3E Long Form (Rev. 05-17)

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of Base Rate Fee for Partially Distant Stations
FORTY-FIFTH SUBSCRIBER GROUP				FORTY-SIXTH 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 First Group \$ 0.00				Gross Receipts Second Group \$ 0.00				
Base Rate Fee First Group \$ 0.00				Base Rate Fee Second Group \$ 0.00				
FORTY-SEVENTH SUBSCRIBER GROUP				FORTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs 0.00				Total DSEs 0.00				
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00				
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00				
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FORTY-NINTH SUBSCRIBER GROUP					FIFTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
FIFTY-FIRST SUBSCRIBER GROUP					FIFTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$	

Form SA3E Long Form (Rev. 05-17)

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIFTY-SEVENTH SUBSCRIBER GROUP					FIFTY-EIGHTTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
FIFTY-NINTH SUBSCRIBER GROUP					SIXTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									
\$ 									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of Base Rate Fee for Partially Distant Stations
SIXTY-FIRST SUBSCRIBER GROUP				SIXTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		0.00		Total DSEs		0.00		
Gross Receipts First Group	\$	0.00		Gross Receipts Second Group	\$	0.00		
Base Rate Fee First Group	\$			Base Rate Fee Second Group	\$			
SIXTY-THIRD SUBSCRIBER GROUP				SIXTY-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		
Gross Receipts Third Group	\$	0.00		Gross Receipts Fourth Group	\$	0.00		
Base Rate Fee Third Group	\$			Base Rate Fee Fourth Group	\$			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								
\$								

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
SIXTY-FIFTH SUBSCRIBER GROUP					SIXTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
SIXTY-SEVENTH SUBSCRIBER GROUP					SIXTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
SIXTY-NINTH SUBSCRIBER GROUP					SEVENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
SEVENTY-FIRST SUBSCRIBER GROUP					SEVENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
SEVENTY-THIRD SUBSCRIBER GROUP					SEVENTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
SEVENTY-FIFTH SUBSCRIBER GROUP					SEVENTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
SEVENTY-SEVENTH SUBSCRIBER GROUP					SEVENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
SEVENTY-NINTH SUBSCRIBER GROUP					EIGHTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
EIGHTY-FIRST SUBSCRIBER GROUP					EIGHTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
EIGHTY-THIRD SUBSCRIBER GROUP					EIGHTY-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					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of Base Rate Fee for Partially Distant Stations
EIGHTY-FIFTH SUBSCRIBER GROUP				EIGHTY-SIXTH 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 First Group		\$ 0.00		Gross Receipts Second Group		\$ 0.00		
Base Rate Fee First Group		\$ 0.00		Base Rate Fee Second Group		\$ 0.00		
EIGHTY-SEVENTH SUBSCRIBER GROUP				EIGHTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs		0.00		Total DSEs		0.00		
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00		
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00		
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
EIGHTY-NINTH SUBSCRIBER GROUP					NINTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
NINETY-FIRST SUBSCRIBER GROUP					NINETY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

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LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
NINETY-SEVENTH SUBSCRIBER GROUP					NINETY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
NINETY-NINTH SUBSCRIBER GROUP					ONE HUNDREDTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									
\$ 									

Form SA3E Long Form (Rev. 05-17)

Form SA3E Long Form (Rev. 05-17)

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED NINTH SUBSCRIBER GROUP					ONE HUNDRED TENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED ELEVENTH SUBSCRIBER GROUP					ONE HUNDRED TWELVTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP					ONE HUNDRED FOURTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP					ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP					ONE HUNDRED EIGHTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED NINETEENTH SUBSCRIBER GROUP					ONE HUNDRED TWENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP					ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP					ONE HUNDRED TWENTY-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			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP					ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP					ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

Form SA3E Long Form (Rev. 05-17)

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED THIRTY-THIRD SUBSCRIBER GROUP					ONE HUNDRED THIRTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED THIRTY-FIFTH SUBSCRIBER GROUP					ONE HUNDRED THIRTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP					ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP					ONE HUNDRED FORTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP					ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP					ONE HUNDRED FORTY-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			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP					ONE HUNDRED FORTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP					ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP					ONE HUNDRED FIFTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP					ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of Base Rate Fee for Partially Distant Stations
ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP				ONE HUNDRED FIFTY-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	
Gross Receipts First Group	\$	0.00		Gross Receipts Second Group	\$	0.00		
Base Rate Fee First Group	\$	0.00		Base Rate Fee Second Group	\$	0.00		
ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP				ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$	0.00		Gross Receipts Fourth Group	\$	0.00		
Base Rate Fee Third Group	\$	0.00		Base Rate Fee Fourth Group	\$	0.00		
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7) \$								

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED FIFTY-SEVENTH SUBSCRIBER GROUP				ONE HUNDRED FIFTY-EIGHTTH SUBSCRIBER GROUP					
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of Base Rate Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED FIFTY-NINTH SUBSCRIBER GROUP				ONE HUNDRED SIXTIETH SUBSCRIBER GROUP					
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									
\$									

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIRST SUBSCRIBER GROUP					SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				8 Computation of 3.75 Fee for Partially Distant Stations	
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
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 Second Group \$ 0.00					
THIRD SUBSCRIBER GROUP					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					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									
\$ 0.00									

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIFTH SUBSCRIBER GROUP					SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of 3.75 Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
SEVENTH SUBSCRIBER GROUP					EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

Nonpermitted 3.75 Stations

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Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
SEVENTEENTH SUBSCRIBER GROUP					EIGHTEENTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of 3.75 Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
NINETEENTH SUBSCRIBER GROUP					TWENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
TWENTY-FIRST SUBSCRIBER GROUP					TWENTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of 3.75 Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
TWENTY-THIRD SUBSCRIBER GROUP					TWENTY-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					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ 	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision		SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP				8 Computation of 3.75 Fee for Partially Distant Stations	
TWENTY-FIFTH SUBSCRIBER GROUP		TWENTY-SIXTH SUBSCRIBER GROUP			
COMMUNITY/ AREA 0		COMMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE		
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 Second Group \$ 0.00			
TWENTY-SEVENTH SUBSCRIBER GROUP		TWENTY-EIGHTH SUBSCRIBER GROUP			
COMMUNITY/ AREA 0		COMMUNITY/ AREA 0			
CALL SIGN	DSE	CALL SIGN	DSE		
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			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)					
\$					

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name			
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations			
TWENTY-NINTH SUBSCRIBER GROUP				THIRTIETH 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 First Group	\$				0.00	Gross Receipts Second Group	\$				0.00
Base Rate Fee First Group	\$				0.00	Base Rate Fee Second Group	\$				0.00
THIRTY-FIRST SUBSCRIBER GROUP				THIRTY-SECOND SUBSCRIBER GROUP							
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs				0.00	Total DSEs				0.00		
Gross Receipts Third Group	\$				0.00	Gross Receipts Fourth Group	\$				0.00
Base Rate Fee Third Group	\$				0.00	Base Rate Fee Fourth Group	\$				0.00
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)											
\$											

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
THIRTY-THIRD SUBSCRIBER GROUP					THIRTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of 3.75 Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
THIRTY-FIFTH SUBSCRIBER GROUP					THIRTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FORTY-FIFTH SUBSCRIBER GROUP				FORTY-SIXTH SUBSCRIBER GROUP					
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0					
CALL SIGN		DSE		CALL SIGN		DSE			
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 Second Group		\$ 0.00			
FORTY-SEVENTH SUBSCRIBER GROUP				FORTY-EIGHTTH SUBSCRIBER GROUP					
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0					
CALL SIGN		DSE		CALL SIGN		DSE			
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			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name			
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations			
FORTY-NINTH SUBSCRIBER GROUP				FIFTIETH 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 First Group	\$				0.00	Gross Receipts Second Group	\$				0.00
Base Rate Fee First Group	\$				0.00	Base Rate Fee Second Group	\$				0.00
FIFTY-FIRST SUBSCRIBER GROUP				FIFTY-SECOND SUBSCRIBER GROUP							
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs				0.00	Total DSEs				0.00		
Gross Receipts Third Group	\$				0.00	Gross Receipts Fourth Group	\$				0.00
Base Rate Fee Third Group	\$				0.00	Base Rate Fee Fourth Group	\$				0.00
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)											

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
FIFTY-THIRD SUBSCRIBER GROUP				FIFTY-FOURTH SUBSCRIBER GROUP				8 Computation of 3.75 Fee for Partially Distant Stations	
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0					
CALL SIGN		DSE		CALL SIGN		DSE			
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 Second Group \$ 0.00					
FIFTY-FIFTH SUBSCRIBER GROUP				FIFTY-SIXTH SUBSCRIBER GROUP					
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0					
CALL SIGN		DSE		CALL SIGN		DSE			
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					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name			
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations			
FIFTY-SEVENTH SUBSCRIBER GROUP				FIFTY-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 First Group	\$				0.00	Gross Receipts Second Group	\$				0.00
Base Rate Fee First Group	\$				0.00	Base Rate Fee Second Group	\$				0.00
FIFTY-NINTH SUBSCRIBER GROUP				SIXTIETH SUBSCRIBER GROUP							
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs				0.00	Total DSEs				0.00		
Gross Receipts Third Group	\$				0.00	Gross Receipts Fourth Group	\$				0.00
Base Rate Fee Third Group	\$				0.00	Base Rate Fee Fourth Group	\$				0.00
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$					

[illegible]

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
SEVENTY-THIRD SUBSCRIBER GROUP					SEVENTY-FOURTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of 3.75 Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
SEVENTY-FIFTH SUBSCRIBER GROUP					SEVENTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$	

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations
SEVENTY-SEVENTH SUBSCRIBER GROUP				SEVENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs				Total DSEs				
		0.00				0.00		
Gross Receipts First Group		\$ 0.00		Gross Receipts Second Group		\$ 0.00		
Base Rate Fee First Group		\$ 0.00		Base Rate Fee Second Group		\$ 0.00		
SEVENTY-NINTH SUBSCRIBER GROUP				EIGHTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs				Total DSEs				
		0.00				0.00		
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00		
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00		
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								
\$								

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations
EIGHTY-FIRST SUBSCRIBER GROUP				EIGHTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group	\$		0.00	Gross Receipts Second Group	\$		0.00	
Base Rate Fee First Group	\$		0.00	Base Rate Fee Second Group	\$		0.00	
EIGHTY-THIRD SUBSCRIBER GROUP				EIGHTY-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	
Gross Receipts Third Group	\$		0.00	Gross Receipts Fourth Group	\$		0.00	
Base Rate Fee Third Group	\$		0.00	Base Rate Fee Fourth Group	\$		0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
EIGHTY-FIFTH SUBSCRIBER GROUP					EIGHTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of 3.75 Fee for Partially Distant Stations	
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 Second Group \$ 0.00					
EIGHTY-SEVENTH SUBSCRIBER GROUP					EIGHTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs 0.00				Total DSEs 0.00					
Gross Receipts Third Group \$ 0.00				Gross Receipts Fourth Group \$ 0.00					
Base Rate Fee Third Group \$ 0.00				Base Rate Fee Fourth Group \$ 0.00					
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ 	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name			
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations			
EIGHTY-NINTH SUBSCRIBER GROUP				NINTIETH 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 First Group	\$				0.00	Gross Receipts Second Group	\$				
Base Rate Fee First Group	\$				0.00	Base Rate Fee Second Group	\$				0.00
NINETY-FIRST SUBSCRIBER GROUP				NINETY-SECOND SUBSCRIBER GROUP							
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs				0.00	Total DSEs				0.00		
Gross Receipts Third Group	\$				0.00	Gross Receipts Fourth Group	\$				0.00
Base Rate Fee Third Group	\$				0.00	Base Rate Fee Fourth Group	\$				0.00
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)											
\$											

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name				
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations				
NINETY-THIRD SUBSCRIBER GROUP				NINETY-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			
Gross Receipts First Group	\$				0.00	Gross Receipts Second Group	\$					0.00
Base Rate Fee First Group	\$				0.00	Base Rate Fee Second Group	\$					0.00
NINETY-FIFTH SUBSCRIBER GROUP				NINETY-SIXTH SUBSCRIBER GROUP								
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Total DSEs				0.00	Total DSEs				0.00			
Gross Receipts Third Group	\$				0.00	Gross Receipts Fourth Group	\$				0.00	
Base Rate Fee Third Group	\$				0.00	Base Rate Fee Fourth Group	\$				0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)												
\$												

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name			
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations			
NINETY-SEVENTH SUBSCRIBER GROUP				NINETY-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 First Group	\$				0.00	Gross Receipts Second Group	\$				
Base Rate Fee First Group	\$				0.00	Base Rate Fee Second Group	\$				0.00
NINETY-NINTH SUBSCRIBER GROUP				ONE HUNDREDTH SUBSCRIBER GROUP							
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs				0.00	Total DSEs				0.00		
Gross Receipts Third Group	\$				0.00	Gross Receipts Fourth Group	\$				0.00
Base Rate Fee Third Group	\$				0.00	Base Rate Fee Fourth Group	\$				0.00
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)											

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name			
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations			
ONE HUNDRED THIRTEENTH SUBSCRIBER GROUP				ONE HUNDRED FOURTEENTH 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 First Group	\$				0.00	Gross Receipts Second Group	\$				
Base Rate Fee First Group	\$				0.00	Base Rate Fee Second Group	\$				0.00
ONE HUNDRED FIFTEENTH SUBSCRIBER GROUP				ONE HUNDRED SIXTEENTH SUBSCRIBER GROUP							
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0							
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE				
Total DSEs				0.00	Total DSEs				0.00		
Gross Receipts Third Group	\$				0.00	Gross Receipts Fourth Group	\$				0.00
Base Rate Fee Third Group	\$				0.00	Base Rate Fee Fourth Group	\$				0.00
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$					

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations
ONE HUNDRED SEVENTEENTH SUBSCRIBER GROUP				ONE HUNDRED EIGHTEENTH 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 First Group	\$		0.00	Gross Receipts Second Group	\$		0.00	
Base Rate Fee First Group	\$		0.00	Base Rate Fee Second Group	\$		0.00	
ONE HUNDRED NINETEENTH SUBSCRIBER GROUP				ONE HUNDRED TWENTIETH SUBSCRIBER GROUP				
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts Third Group	\$		0.00	Gross Receipts Fourth Group	\$		0.00	
Base Rate Fee Third Group	\$		0.00	Base Rate Fee Fourth Group	\$		0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision				SYSTEM ID# 14007				Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED TWENTY-FIRST SUBSCRIBER GROUP				ONE HUNDRED TWENTY-SECOND SUBSCRIBER GROUP					
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of 3.75 Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED TWENTY-THIRD SUBSCRIBER GROUP				ONE HUNDRED TWENTY-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			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED TWENTY-FIFTH SUBSCRIBER GROUP					ONE HUNDRED TWENTY-SIXTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	8 Computation of 3.75 Fee for Partially Distant Stations	
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 Second Group		\$ 0.00			
ONE HUNDRED TWENTY-SEVENTH SUBSCRIBER GROUP					ONE HUNDRED TWENTY-EIGHTH SUBSCRIBER GROUP				
COMMUNITY/ AREA 0					COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs		0.00		Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00		Gross Receipts Fourth Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00		Base Rate Fee Fourth Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$ 	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name				
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations				
ONE HUNDRED TWENTY-NINTH SUBSCRIBER GROUP				ONE HUNDRED THIRTIETH 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 First Group	\$				0.00	Gross Receipts Second Group	\$					0.00
Base Rate Fee First Group	\$				0.00	Base Rate Fee Second Group	\$					0.00
ONE HUNDRED THIRTY-FIRST SUBSCRIBER GROUP				ONE HUNDRED THIRTY-SECOND SUBSCRIBER GROUP								
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Total DSEs				0.00	Total DSEs				0.00			
Gross Receipts Third Group	\$				0.00	Gross Receipts Fourth Group	\$				0.00	
Base Rate Fee Third Group	\$				0.00	Base Rate Fee Fourth Group	\$				0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)												
\$												

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision		SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP					
ONE HUNDRED THIRTY-SEVENTH SUBSCRIBER GROUP				ONE HUNDRED THIRTY-EIGHTH SUBSCRIBER GROUP	
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0	
CALL SIGN		DSE			
Total DSEs		0.00			
Gross Receipts First Group		\$ 0.00			
Base Rate Fee First Group		\$ 0.00			
ONE HUNDRED THIRTY-NINTH SUBSCRIBER GROUP				ONE HUNDRED FORTIETH SUBSCRIBER GROUP	
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0	
CALL SIGN		DSE			
Total DSEs		0.00			
Gross Receipts Third Group		\$ 0.00			
Base Rate Fee Third Group		\$ 0.00			
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)				\$	

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations
ONE HUNDRED FORTY-FIRST SUBSCRIBER GROUP				ONE HUNDRED FORTY-SECOND SUBSCRIBER GROUP				
COMMUNITY/ AREA 0				COMMUNITY/ AREA 0				
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	
Total DSEs			0.00	Total DSEs			0.00	
Gross Receipts First Group	\$	0.00		Gross Receipts Second Group	\$	0.00		
Base Rate Fee First Group	\$	0.00		Base Rate Fee Second Group	\$	0.00		
ONE HUNDRED FORTY-THIRD SUBSCRIBER GROUP				ONE HUNDRED FORTY-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	
Gross Receipts Third Group	\$	0.00		Gross Receipts Fourth Group	\$	0.00		
Base Rate Fee Third Group	\$	0.00		Base Rate Fee Fourth Group	\$	0.00		
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)								\$

Nonpermitted 3.75 Stations

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name				
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP								8 Computation of 3.75 Fee for Partially Distant Stations				
ONE HUNDRED FORTY-FIFTH SUBSCRIBER GROUP				ONE HUNDRED FORTY-SIXTH 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 First Group	\$				0.00	Gross Receipts Second Group	\$					0.00
Base Rate Fee First Group	\$				0.00	Base Rate Fee Second Group	\$					0.00
ONE HUNDRED FORTY-SEVENTH SUBSCRIBER GROUP				ONE HUNDRED FORTY-EIGHTH SUBSCRIBER GROUP								
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0								
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE					
Total DSEs				0.00	Total DSEs				0.00			
Gross Receipts Third Group	\$				0.00	Gross Receipts Fourth Group	\$				0.00	
Base Rate Fee Third Group	\$				0.00	Base Rate Fee Fourth Group	\$				0.00	
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)						\$						

LEGAL NAME OF OWNER OF CABLE SYSTEM: Shrewsbury Community Cablevision						SYSTEM ID# 14007		Name	
BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP									
ONE HUNDRED FORTY-NINTH SUBSCRIBER GROUP				ONE HUNDRED FIFTIETH 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 First Group			\$ 0.00	Gross Receipts Second Group			\$ 0.00		
Base Rate Fee First Group			\$ 0.00	Base Rate Fee Second Group			\$ 0.00		
ONE HUNDRED FIFTY-FIRST SUBSCRIBER GROUP				ONE HUNDRED FIFTY-SECOND SUBSCRIBER GROUP					
COMMUNITY/ AREA _____ 0				COMMUNITY/ AREA _____ 0					
CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE	CALL SIGN	DSE		
Total DSEs			0.00	Total DSEs			0.00		
Gross Receipts Third Group			\$ 0.00	Gross Receipts Fourth Group			\$ 0.00		
Base Rate Fee Third Group			\$ 0.00	Base Rate Fee Fourth Group			\$ 0.00		
Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above. Enter here and in block 3, line 1, space L (page 7)									
\$									

LEGAL NAME OF OWNER OF CABLE SYSTEM:
Shrewsbury Community Cablevision

SYSTEM ID#
14007

Name

BLOCK A: COMPUTATION OF BASE RATE FEES FOR EACH SUBSCRIBER GROUP

ONE HUNDRED FIFTY-THIRD SUBSCRIBER GROUP

COMMUNITY/ AREA
0

CALL SIGN
DSE

ONE HUNDRED FIFTY-FOURTH SUBSCRIBER GROUP

COMMUNITY/ AREA
0

CALL SIGN
DSE

Total DSEs
0.00

Gross Receipts First Group
\$
0.00

Base Rate Fee First Group
\$
0.00

Total DSEs
0.00

Gross Receipts Second Group
\$
0.00

Base Rate Fee Second Group
\$
0.00

ONE HUNDRED FIFTY-FIFTH SUBSCRIBER GROUP

COMMUNITY/ AREA
0

CALL SIGN
DSE

ONE HUNDRED FIFTY-SIXTH SUBSCRIBER GROUP

COMMUNITY/ AREA
0

CALL SIGN
DSE

Total DSEs
0.00

Gross Receipts Third Group
\$
0.00

Base Rate Fee Third Group
\$
0.00

Total DSEs
0.00

Gross Receipts Fourth Group
\$
0.00

Base Rate Fee Fourth Group
\$
0.00

Base Rate Fee: Add the base rate fees for each subscriber group as shown in the boxes above.
Enter here and in block 3, line 1, space L (page 7)

\$

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Computation
of
3.75 Fee
for
Partially
Distant
Stations

CONTROL #:

REMITTANCE #:



Cable Worksheet

Total amount of
remittance

Number of SAs 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
Accounting
Period

(enter four digit year and /1 (for Jan-Jun period) or /2 (for Jul-Dec period) No spaces)

☐ Letter sent☐ Information received☐ Accepted☐ Phone call/Date/ContactSpace B
Owner☐ Letter sent☐ Information received☐ Accepted☐ Phone call/Date/ContactSpace D
Area Served☐ Letter sent☐ Information received☐ Accepted☐ Phone call/Date/ContactSpace E
Secondary
Transission
Service
Subscribers:
and Rates☐ Letter sent☐ Information received☐ Accepted☐ Phone call/Date/ContactSpace G
Primary
Transmitters:
Television☐ Letter sent☐ Information received☐ Accepted☐ Phone call/Date/ContactSpace H
Primary
Transmitters:
Radio☐ Accepted☐ Phone call/Date/ContactSpace I
Substitute
Carriage

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