Central New York Division 6005 Fair Lakes Road, E. Syracuse, NY 13057 P. O. Box 4733, Syracuse, NY 13221 Tel 315-634-6200



October 29, 2010

Ms. Jaclyn A. Brilling New York State Public Service Commission Three Empire State Plaza Albany, NY 12223

RE: 2010 (Revised), 2011 FCC Form 1240 & 1205

Dear Ms. Brilling:

The Federal Communications Commission's regulations concerning cable rates and our Social Contract permit us to adjust rates annually for inflation and changes in external costs such as programming fees and copyright fees.

Accordingly, please find FCC Forms 1205 and 1240 which we used for calculating our BST rates, equipment and installation charges. We reserve the right to update the enclosed forms should better information become available to us.

The following items are included:

- Revised 2010 FCC Form 1240
- Community Unit ID Numbers included in each filing
- 2010 Rate Card and Channel Line-Up
- 2011 FCC Form 1240
- 2011 Proposed Channel Line-Ups
- FCC Form 1205

Our customer's will receive notification of the rate adjustment in their bill preceding this change in rates.

Please do not hesitate to contact me at (315) 634-6255 if you have any questions.

Sincerely,

Director, Budgets & Analysis

Enclosure

FCC FORM 1240 UPDATING MAXIMUM PERMITTED RATES FOR REGULATED CABLE SERVICES

Cable Operator:			
Name of Cable Operator			
Time Warner Cable - Carthage - Wellesley Island			
Mailing Address of Cable Operator			
P.O. Box 4733 City	Cast.	ZIP Code	
	State	13221-4733	
Syracuse		YES	NO
Does this filing involve a single franchise authority and a single com	munity unit?		X
It yes, complete the tranchise authority information below and enter the associated CUID number here:		YES	NO
Does this filing involve a single franchise authority but multiple con	nmunity units?		
	-		· · · · · · · · · · · · · · · · · · ·
If yes, enter the associated CUIDs below and complete the franchise	e authority information at the bottom	of this page:	
	NY1495		
Does this filing involve multiple franchise authorities?	le the following franchise authority i		
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s):	le the following franchise authority i	nformation with	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information:	te the following franchise authority i	nformation with	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority	le the following franchise authority i	nformation with	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information:	le the following franchise authority i	nformation with	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority	le the following franchise authority i	nformation with	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority NYS Public Service Commission	te the following franchise authority i	nformation with 	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority <u>Agency Bldg Three, Empire State Plaza</u> City Albany	State		
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority <u>Agency Bldg Three, Empire State Plaza</u> City <u>Albany</u> Telephone number	State NY Fax Number	ZIP Code	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority <u>Agency Bldg Three, Empire State Plaza</u> City Albany	State	ZIP Code	
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If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority <u>Agency Bldg Three, Empire State Plaza</u> City <u>Albany</u> Telephone number {518} 474-4992	State NY Fax Number (518) 486-5727	ZIP Code	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority <u>Agency Bidg Three, Empire State Plaza</u> City <u>Albany</u> Telephone number (518) 474-4992 For what purpose is this Form 1240 being filed? Please put an "X"	State NY Fax Number (518) 486-5727	ZIP Code	X
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority <u>Agency Bldg Three, Empire State Plaza</u> City <u>Albany</u> Telephone number (518) 474-4992 For what purpose is this Form 1240 being filed? Please put an "X" Original Form 1240 for Basic Tier	State NY Fax Number (518) 486-5727	ZIP Code	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority <u>Agency Bldg Three, Empire State Plaza</u> City <u>Albany</u> Telephone number (518) 474-4992 For what purpose is this Form 1240 being filed? Please put an "X" Original Form 1240 for Basic Tier Amended Form 1240 for Basic Tier	State NY Fax Number (518) 486-5727	ZIP Code	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority <u>Agency Bidg Three, Empire State Plaza</u> City <u>Albany</u> Telephone number {518} 474-4992 For what purpose is this Form 1240 being filed? Please put an "X" Original Form 1240 for Basic Tier Amended Form 1240 for Basic Tier Original Form 1240 for CPS Tier	State NY Fax Number (518) 486-5727	ZIP Code	
If yes, attach a separate sheet for each franchise authority and includ its associated CUID(s): ranchise Authority Information: Name of Local Franchising Authority <u>NYS Public Service Commission</u> Mailing Address of Local Franchising Authority <u>Agency Bidg Three, Empire State Plaza</u> City <u>Albany</u> Telephone number {518} 474-4992 For what purpose is this Form 1240 being filed? Please put an "X" Original Form 1240 for Basic Tier Amended Form 1240 for Basic Tier Original Form 1240 for CPS Tier	State NY Fax Number (518) 486-5727 in the appropriate box.	ZIP Code	
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(SAT)OCT 30 2010 13:53/ST.13:53/No.7537030084 P

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(mm/yy)

(mm/yy)

7. Status of Previous Filing of FCC Form 1240 (enter an "x" in the approp	priate box)	VDA	
a. Is this the first FCC Form 1240 filed in any jurisdiction?	F	YES	<u>NO</u>
b. Has an FCC Form 1240 been filed previously with the FCC?		X	A
	If yes, enter the date of the most recent filing:	10/31/09	(mm/dd/yy)
	in yes, enter the date of the most recent ming.	YES	(mm/dd/yy) NO
. Has an FCC Form 1240 been filed previously with the Franchising Authorit	y?	X	
	If yes, enter the date of the most recent filing:	10/31/09	(mm/dd/yy)
3. Status of Previous Filing of FCC Form 1210 (enter an "x" in the appro	priate box)		
	-	YES	NO
. Has an FCC Form 1210 been previously filed with the FCC?	Ļ	X	
	If yes, enter the date of the most recent filing:	05/31/98	(mm/dd/yy)
	_	YES	NO
>. Has an FCC Form 1210 been previously filed with the Franchising Authorit	ty?	X	
	If yes, enter the date of the most recent filing:	05/31/98	(mm/dd/yy)
9. Status of FCC Form 1200 Filing (enter an "x" in the appropriate box)			
Har an ECG Frank 1960 have an including to the Middle ECG	r	YES	NÖ
h. Has an FCC Form 1200 been previously filed with the FCC?	Ļ	X	· · · · · · · · · · · · · · · · · · ·
	If yes, enter the date filed:	07/29/94	(mm/dd/yy)
	-	YES	NO
b. Has an FCC Form 1200 been previously filed with the Franchising Authorit	ty?	<u> </u>	
	If yes, enter the date filed:	07/29/94	(mm/dd/yy)
10. Cable Programming Services Complaint Status (enter an "x" in the aj	ppropriate box)		
	-	YES	NO
a. Is this form being filed in response to an FCC Form 329 complaint?	Ļ		X
	If yes, enter the date of the complaint:		(mm/dđ/yy)
	F	YES	NO
11. Is FCC Form 1205 Being Included With This Filing	L	X	
12. Selection of "Going Forward" Channel Addition Methodology (enter	an "x" in the appropriate box)		
Check here if you are using the original rules [MARKUP METHOD].			
Check here if you are using the new, alternative rules [CAPS METHOD].		
If using the CAPS METHOD, have you elected to revise recovery for		YES	NO
channels added during the period May 15, 1994 to Dec. 31, 1994?	Γ		
13. Headend Upgrade Methodology •NOTE: Operators must certify to the Commission their eligibility to use this upgrade	methodology and attach an equipment list and depred	ciation schedule.	

*NOTE: Operators must certify to the Commission their eligibility to use this upgrade methodology and attach an equipment list and depreciation schedule.

Check here if you are a qualifying small system using the streamlined headend upgrade methodology.

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Part I: Preliminary Information

Module A: Maximum Permitted Rate From Previous Filing

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
Al Current M	faximum Permitted Rate	\$45,5462	\$0,0000	\$0,000		
			Module B: Subscri	bership		
Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
	Subscribership For True-Up Period 1	204	0	0	110.14	Ther 5
B2 Average S	Subscribership For True-Up Period 2					
B3 Estimated	Average Subscribership For Projected Period	235	0	0		
			Module C: Inflation I	nformation		· · · · · · · · · · · · · · · · · · ·
Line CI Unclaime	Line Description d Inflation: Operator Switching From 1210 To 1240		· · · · · ·			
	d Inflation: Unregulated Operator Responding to Rate (Complaint				1,000
	Factor For True-Up Period 1 [Wks 1]	.onpiaint				1.000
	Factor For True-Up Period 2 [Wks 1]					1.009:
	CC Inflation Factor	· · · · · · · · · · · · · · · · · · ·				
		I	Madula D. Calculating (ha Daas Data		1.019
		a 11	Module D: Calculating t	c c	d	e
Line	Line Description	Basic	Tier 2	Tier 3	Tier 4	Tier 5
DI Current H	eadend Upgrade Segment					
	xternal Costs Segment	\$2.4375	\$0.0000	\$0,000		
	aps Method Segment					
	farkup Method Segment					<u> </u>
D5 Current C	hannel Movement and Deletion Segment			· · · ·		
D6 Current T	rue-Up Segment	\$29,5931	\$0.0000	\$0,000		
D7 Current Ir	iflation Segment	\$0.3630	\$0.0000	\$0.0000		
D8 Base Rate	[A1-D1-D2-D3-D4-D5-D6-D7]	\$13.1526	\$0,0000	\$0,0000	\$0,000	\$0,000
			Part II: True-1) Module E: Timing In	n Period formation		
Line	Line Description					
El What Typ	e of True-Up Is Being Performed? (Answer "1", "2", or	"3". See Instructions for a descr	ription of these types.)			:
If "1", go	to Module I. If "2", answer E2 and E3. If "3", ans	wer E2, E3, E4, and E5.				
E2 Number o	f Months in the True-Up Period 1					13
E3 Number o	f Months between the end of True-Up Period 1 and the	end of the most recent Projected	l Period			
E4 Number o	f Months in True-Up Period 2 Eligible for Interest					
S Number o	f Months True-Up Period 2 Ineligible for Interest					

Module F: Maximum Permitted Rate For True-Up Period 1

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
F1	Caps Method Segment For True-Up Period 1 [Wks 2]					
F2	Markup Method Segment For True-Up Period 1 [Wks 3]					
F3	Chan Mymnt Deletn Segment For True-Up Period 1 [Wks' 4/5]					
F4	True-Up Period 1 Rate Eligible For Inflation [D8+F1+F2+F3]	\$13,1526				
F5	Inflation Segment for True-Up Period 1 [(F4*C3)-F4]	\$0.1207				
F6	Headend Upgrade Segment For True-Up Period 1 [Wks 6]					
F7	External Costs Segment For True-Up Period 1 [Wks 7]	\$2.4386				
F8	True-Up Segment For True-Up Period I	\$29.5931	\$0,000	\$0.0000		
F9	Max Perm Rate for True-Up Period 1 [F4+F5+F6+F7+F8]	\$45,3050	\$0.000	\$0,0000	\$0.0000	\$0,0000

Module G: Maximum Permitted Rate For True-Up Period 2

Line	Line Description	B Basic	b Tier 2	c Tier 3	d <u>Tier 4</u>	e Tier 5		
GI	Caps Method Segment For True-Up Period 2 [Wks 2]							
G2	Markup Method Segment For True-Up Period 2 [Wks 3]							
G3	Chan Mvmnt Deletn Segment For True-Up Period 2 [Wks' 4/5]							
G4	TU Period 2 Rate Eligible For Inflation [D8+F5+G1+G2+G3]							
G5	Inflation Segment for True-Up Period 2 [(G4*C4)-G4]							
G6	Headend Upgrade Segment For True-Up Period 2 [Wks 6]							
G7	External Costs Segment For True-Up Period 2 [Wks 7]							
G8	True-Up Segment For True-Up Period 2							
G9	Max Perm Rate for True-Up Period 2 [G4+G5+G6+G7+G8]	\$0,0000	\$0.0000	\$0.0000	\$ 0,0000	\$0.0000		

Module H: True-Up Adjustment Calculation

Line Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
Adjustment For True-Up Period 1	· · · · · · · · · · · · · · · · · · ·				
H1 Revenue From Period 1	\$20,636.6400	\$0.0000	\$0,000	\$0.000	\$0.0000
H2 Revenue From Max Permitted Rate for Period 1	\$110,906.5763	\$0.0000	\$0.0000	\$0,000	\$0,000
H3 True-Up Period Adjustment [H2-H1]	\$90,269.9363	\$0.0000	\$0.0000	\$0.0000	\$0,000
H4 Interest on Period 1 Adjustment	\$5,077.6839	\$0.0000	\$0.000	\$0,000	\$0,0000
Adjustment For True-Up Period 2					
H5 Revenue From Period 2 Eligible for Interest					
H6 Revenue From Max Perm Rate for Period 2 Eligible For Interest					
H7 Period 2 Adjustment Eligible For Interest [H6-H5]					
H8 Interest on Period 2 Adjustment (See instructions for formula)					
H9 Revenue From Period 2 Ineligible for Interest					
H10 Revenue From Max Perm Rate for Period 2 Ineligible for Interest					
H11 Period 2 Adjustment Ineligible For Interest [H10-H9]					
Total True-Up Adjustment					
H12 Previous Remaining True-Up Adjustment	·				
H13 Total True-Up Adjustment [H3+H4+H7+H8+H11+H12]	\$95,347.6202	\$0,0000	\$0,000	\$0.0000	\$0,0000
H14 Amount of True-Up Claimed For This Projected Period	\$95,347.6202	\$0.0000	\$0.000	\$ 0.0000	\$0.0000
H15 Remaining True-Up Adjustment [H13-H14]	\$0.0000	\$0.0000	\$0.000	\$ 0,0000	\$0,000

Part III: Projected Period Module I: New Maximum Permitted Rate

Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
п	Caps Method Segment For Projected Period [Wks 2]					
12	Markup Method Segment For Projected Period [Wks 3]					
13	Chan Mvmnt Deletn Segment For Projected Period [Wks 4/5]					
I4	Proj. Period Rate Eligible For Inflation [D8+F5+G5+I1+I2+I3+W	\$13.2733				
15	Inflation Segment for Projected Period [(I4*C5)-I4]	\$0.2535				
16	Headend Upgrade Segment For Projected Period [Wks 6]					
17	External Costs Segment For Projected Period [Wks 7]	\$3.0243				
I 8	True-Up Segment For Projected Period	\$33.8112				
19	Max Permitted Rate for Projected Period [14+15+16+17+18+Wks]	\$\$0.3623	\$0,000			
110	Operator Selected Rate For Projected Period	\$9.4100	\$0.0000			

Certification Statement

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. GODE TITLE 18. SECTION 1001), AND/OR FORFEITURE (U.S. CODE, TITLE 47. SECTION 503).

Lecrif that the statements made in this form are true an Signature		/ knowledge and belief, and are made in good faith. Date 10/28/10
Name and Title of Person Completing this Form:	Karen Conaty Directo	r, Budgets & Analysis
Telephone number		Fax Number
(315) 634-6255		(315) 234-0251

Worksheet 1 - True-Up Period Inflation

For instructions, see Appendix A of Instructions For FCC Form 1240

Line	Period	FCC Inflation Factor
101	Month 1	2.76%
102	Month 2	2.76%
103	Month 3	2.76%
104	Month 4	0.00%
105	Month 5	0.00%
106	Month 6	0.00%
107	Month 7	0.41%
108	Month 8	0.41%
109	Month 9	0.41%
110	Month 10	0.50%
111	Month 11	0.50%
112	Month 12	0.50%
113	Average Inflation Factor for True Up Period 1	1.0092
114	Month 13	
115	Month 14	
116	Month 15	
117	Month 16	
118	Month 17	
119	Month 18	
120	Month 19	······································
121	Month 20	······································
122	Month 21	
123	Month 22	
124	Month 23	
125	Month 24	
126	Average Inflation Factor for True Up Period 2	

Worksheet 7 - External Costs True-Up Period

					True-Up Period	Projected Period
Questic	on 1. For which time period are you filling out this work	sheet? [Put an "X" in t	the appropriate box.]		x	
Ouestic	on 2. How long is the first period, in months, for which r	- ates are being set with	this worksheet?	· · · ·		12
	on 3. How long is the second period, in months, for which	-				
Line	Line Description	a Basic	D Tier 2	c Tier 3	Tier 4	e Tier 5
			Period 1			
Exter	nal Costs Eligible for Markup					
701	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period	\$4,555.73	\$ 0,00	\$0.00		
702	Retransmission Consent Fees For Períod					
703	Copyright Fees For Period	\$997,56	\$0,00			
704	External Costs Eligible For 7.5% Markup	\$5,553.29				
705	Marked Up External Costs	\$5,969.7846				
Exter	rnal Costs Not Eligible for Markup		<u> </u>			
706	Cable Specific Taxes For Period					
707	Franchise Related Costs For Period	\$0.00				
708	Commission Regulatory Fees For Period	\$0.00				
708.1	Price Cap Allowance per Section III.F.4.a of Time Warner Social Contract		\$0.00			
709	Total External Costs For Period	\$5,969.7846	\$0,0000 :	\$0.0000	\$0.0000	\$0.000
710	Monthly, Per-Subscriber External Costs For Period	\$2.4386				
			Period 2			
Exter	rnal Costs Eligible for Markup					
711	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period					
712	Retransmission Consent Fees For Period					
713	Copyright Fees For Period					
714	External Costs Eligible For 7.5% Markup					
715	Marked Up External Costs					
Exter	rnal Costs Not Eligible for Markup	-				
716	Cable Specific Taxes For Period					
717	Franchise Related Costs For Period					
718	Commission Regulatory Fees For Period					
718.1	Price Cap Allowance per Section III.F.4.a of Time Warner Social Contract					
719	Total External Costs For Period					
720	Monthly, Per-Subscriber External Costs For Period					

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Worksheet 7 - External Costs Projected Period

For instructions, see Appendix A of Instructions For FCC Form 1240

Question 1. For which time period are you filling out this worksheet? [Put an "X" in the appropriate box.]

Question 2. How long is the first period, in months, for which rates are being set with this worksheet? Question 3. How long is the second period, in months, for which rates are being set with this worksheet?

Line	Line Description	A Basic	D Tier 2	c Tier 3	Tier 4	e Tier 5
	the Description		Period 1		1101 4	110 0
Exter	nal Costs Eligible for Markup					
701	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period	\$ 6,666.76	\$0 .00	\$0,00		
702	Retransmission Consent Fees For Period					
703	Copyright Fees For Period	\$1,266.74	\$0,00			
704	External Costs Eligible For 7.5% Markup	\$7,933.51				
705	Marked Up External Costs	\$8,528.5190				
Exter	nal Costs Not Eligible for Markup					
706	Cable Specific Taxes For Period					
707	Franchise Related Costs For Period					
708	Commission Regulatory Fees For Period	\$0.00				
708.1	Price Cap Allowance per Section III.F.4.a of Time Warner Social Contract	\$0.00	\$0.00			
709	Total External Costs For Period	\$8,528.5190	\$0.0000			
710	Monthly, Per-Subscriber External Costs For Period	\$3.0243				

True-Up Period Projected Period X

Worksheet 8 - True-Up Rate Charged

For instructions, see Appendix A of Instructions For FCC Form 1240

	on 1. How long is the True-Up Period 1, i on 2. How long is the True-Up Period 2, i					12
ine	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
D1	Month I	\$7,7800	\$0.0000	\$0,0000		
02	Month 2	\$7.7800	\$0,0000	\$0,0000		
03	Month 3	\$8.5600	\$0.0000	\$0,0000		
04	Month 4	\$8,5600	\$0,0000	\$0.0000		
05	Month 5	\$8,5600	\$0,0000	\$0.0000		
06	Month 6	\$8,5600	\$0,0000	\$0.0000		
07	Month 7	\$8.5600	\$0,0000	\$0,0000		
08	Month 8	\$8.5600	\$0,0000	\$0,0000		-
09	Month 9	\$8,5600	\$0,0000	\$0.0000		
10	Month 10	\$8.5600	\$0,0000	\$0.0000		
11	Month 11	\$8.5600	\$0,0000	\$0.0000		
12	Month 12	\$8,5600	\$0.0000	\$0.0000		
13	Period 1 Average Rate	\$8.4300				-
						•
14	Month 13				1	
15	Month 14				-	
16	Month 15					
17	Month 16					
18	Month 17					
19	Month 18					
20	Month 19					
21	Month 20					
22	Month 21					1
23	Month 22					
24	Month 23					1
25	Month 24					
26	Period 2 Average Rate					

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M:\Audit\Channel Lineup Audit\2009\Q4\Channel Lineups\Jefferson_Lewis Counties.csv

Ch. No.	Call Sign	Name	Classification
2	WNYF	WNYF (FOX, Watertown)	Basic Cable
3	WSTM	WSTM	Basic Cable
4	WWNY	WWNY	Basic Cable
5	WWTI	WWTI	Basic Cable
· 7	TVGN	TV Guide Network (analog)	Basic Cable
8	WPBSDT	WPBS DT	Basic Cable
9	TBS	TBS	Basic Cable
10	NWS10	News 10 Now	Basic Cable
11	CKWS	CKWS - TV / CH # 11	Basic Cable
12	WGN	WGN America	Basic Cable
13	CJOH-13	CJOH-13 (CTV, Ottawa Ont.)	Basic Cable
14	WWTIDT2	The North Country CW	Basic Cable
95	LO	Local Origination Programming	Basic Cable
96	CSI	Cable System Information	Basic Cable
99	PUBLIC	Public Access	Basic Cable

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Jefferson/Lewis Counties Rates & Services

ί.	Basic Service:	\$8.56
	Standard Service: (Consists of Basic Service @ \$8.56/mo. + all Standard channels @ \$53.94/mo.)	62.50
<u>}.</u>	Premium Services:*	
	HBO, Cinemax, Showtime Unlimited with On Demand Service	
	1 st Premium Service	12.95
	2 nd Premium Service	9.95
	3 rd Premium Service	9.95
	Starz * Digital equipment required to receive these Premium Services.	10.75
2.	Digital Cable Services†	
	Explorer Pak (Includes Digital Navigator Package)	8.95
	Movie Pak	7.75
	(Includes Digital Navigator Package)	5.95
	High-Definition Package (An HD television and an HD terminal is required.)	5.93
	Sports Plus Package	3.95
	Latino Especial Package	9.95
	Digital Navigator Package	1.00
	(Includes Interactive Program Guide, Music Choice channel plus access to iNDemand, On Demand and Premium Servic	S ,
	Digital Video Recorder (DVR) Service (First Terminal) Fee per additional DVR terminal	10.95 10.95
	Family Choice	12.99
	(Basic Cable service and lease of a digital set-top box require Standard Cable Service, Premium channels, On Demand ser and some interactive services are not available with Family C Other restrictions apply.)	vices
).	Equipment:	
	Home Terminal/Digital Terminal/HD Terminal	7.21
	Remote/Digital Remote	.31
	Non-Addressable Converter	.21
	• • • • • • • • • • • • • •	2.54
	Cable Card (for Digital Cable-ready sets)	
	Cable Card (for Digital Cable-ready sets)	
		41.88
	Installation Charges: Standard Install/Reconnect	
-	Installation Charges: Standard Install/Reconnect (pre-wired home) Standard Installation (unwired home) Additional Outlet(s)	60.40
	Installation Charges: Standard Install/Reconnect (pre-wired home) Standard Installation (unwired home) Additional Outlet(s) at time of initial installation	60.40 27.41
-	Installation Charges: Standard Install/Reconnect (pre-wired home) Standard Installation (unwired home) Additional Outlet(s) at time of initial installation Additional Outlet(s), separate trip	60.40 27.41 43.35
	Installation Charges: Standard Install/Reconnect (pre-wired home) Standard Installation (unwired home) Additional Outlet(s) at time of initial installation Additional Outlet(s), separate trip Equipment Deactivation Fee	60.40 27.41
	Installation Charges: Standard Install/Reconnect (pre-wired home) Standard Installation (unwired home) Additional Outlet(s) at time of initial installation Additional Outlet(s), separate trip	60.40 27.41 43.35

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3/09

Jeff/Lewis JLC 1831

Q4 Carthage Marketing Channel Lineup

Ch. No.	Call Sign	Name	Classification
2	WNYF	WNYF (FOX, Watertown)	Basic
3	WSTM	WSTM	Basic
4	WWNY	WWNY	Basic
5	WWTI	WWTI	Basic
7	TWCS	Time Warner Cable Sports	Basic
8	WPBSDT	WPBS DT	Basic
9	TBS	TBS	Basic
10	YNN	YNN	Basic
11	CKWS	CKWS - TV / CH # 11	Basic
12	WGN AMER	WGN America	Basic
13	CJOH	CJOH-TV/CH#13	Basic
14	WWTIDT2	WWTI-DT2 (The North Country CW)	Basic
95	TVGN	TV Guide Network	Basic
96	CSI	Cable System Information	Basic
99	PUBLIC	Public Access	Basic

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effe	rson/Lewis Counties Rates & Services	Jeff/Lewis JLC 1831
A.	Basic Service:	\$9.41
	Standard Service: (Consists of Basic Service @ \$9.41/mo. + all Standard channels @ \$58.34/mo.)	67.75
В.	Premium Services:* HBO, Cinemax, Showtime Unlimited with On Demand Service	
	1 st Premium Service	13.95
	2 nd Premium Service	10,95
	3 rd Premium Service	10.95
	Starz	11.75
	* Digital equipment required to receive these Premium Services.	
C.	Digital Cable Services†	
	Digital Navigator	1.00 8.95
	Explorer Pak Movie Pak	8.90 7.25
	High-Definition Package	7,20 5.95
	(An HD television and an HD terminal is required.)	2.82
	Sports Plus Package	3.95
	Latino Especial Package	9.95
	Digital Video Recorder (DVR) Service (Per Terminal)	10.95
	Family Choice	12,99
	(Basic Cable service and leFase of a digital set-top box requi Standard Cable Service, Premium channels, On Demand ser and some interactive services are not available with Family C Other restrictions apply.)	vices
D.	Equipment:	
	Home Terminal/Digital Terminal/HD Terminal	7.00
	Remote/Digital Remote	.34
	Non-Addressable Converter	.22
	CableCARD ^{**} ⁺⁺ (for Digital Cable-ready sets)	2.50
Ε.	Installation Charges:**	
	Standard Install/Reconnect (pre-wired home)	42.64
	Standard Installation (unwired home)	61.55
	Additional Outlet(s) at time of initial installation	29.39
	Additional Outlet(s) separate trip	43,19
	Equipment Deactivation Fee	5.99
	COD Fee (Fee for payments received at time of install)	5.95
	Payment Processing Fee (by phone; non automated)	5.00
	**Sales tax will be applied to installation charges	

† Bigital furninal is required in order to receive sense channels and/or services. Bates and charges apply to standard residential instillations and service. The above rates for cable service packages and equipment is not include franchise fores of State and Foderal regulatory from. †† Not all channels available with a CableCAR0¹¹⁰.

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FCC FORM 1240 UPDATING MAXIMUM PERMITTED RATES FOR REGULATED CABLE SERVICES

C.	hla	A.	nor	ator	
- L 8	Die	U	рег	атог	

Name of Cable Operator			
Time Warner Cable - Carthage - Wellesley Island			
Mailing Address of Cable Operator			
P.O. Box 4733			
City	State	ZIP Code	
Syracuse	NY	13221-4733	
		YES	NO
1. Does this filing involve a single franchise authority and a single community	unit?		X
If yes, complete the franchise authority information below			
and enter the associated CUID number here:			
		YES	NO
2. Does this filing involve a single franchise authority but multiple community	y units?	X	

If yes, enter the associated CUIDs below and complete the franchise authority information at the bottom of this page:

NY1495

3. Does this filing involve multiple franchise authorities?

If yes, attach a separate sheet for each franchise authority and include the following franchise authority information with its according of UD(c):

its associated CUID(s): Franchise Authority Information:

Name of Local Franchising Authority		
NYS Public Service Commission		
Mailing Address of Local Franchising Authority		
Agency Bldg Three, Empire State Plaza		
City	State	ZIP Code
Albany	NY	12223
Telephone number	Fax Number	
(518) 474-4992	(518) 486-5727	

4. For what purpose is this Form 1240 being filed? Please put an "X" in the appropriate box.

a. Original Form 1240 for Basic Tier		X	
b. Amended Form 1240 for Basic Tier			
c. Or			
d. Amended Form 1240 for CPS Tier			
		0	_
5. Indicate the one year time period for which you are setting rates (the Projected Period).	02/11	01/12	(mm/yy)
	t	0	-
6. Indicate the time period for which you are performing a true-up.	01/10	12/10	(mm/yy)

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7. Status of Previous Filing of FCC Form 1240 (enter an "x" in the appropriate box)

	. ,	YES	NO
 a. Is this the first FCC Form 1240 filed in any jurisdiction? b. Has an FCC Form 1240 been filed previously with the FCC? 		<u> </u>	X
	If yes, enter the date of the most recent filing:	10/31/09	(mm/dd/yy)
		YES	NO
c. Has an FCC Form 1240 been filed previously with the Franchising Authorit	y?	X	
	If yes, enter the date of the most recent filing:	10/31/09	(mm/dd/yy)
8. Status of Previous Filing of FCC Form 1210 (enter an "x" in the appro	opriate box)		
a. Has an FCC Form 1210 been previously filed with the FCC?		YES X	NO
······································	If we are the data of the most access filmer	05/31/98	(
	If yes, enter the date of the most recent filing:		(mm/dd/yy)
b. Has an FCC Form 1210 been previously filed with the Franchising Authorit	1 27	YES X	NO
	-		
	If yes, enter the date of the most recent filing:	05/31/98	(mm/dd/yy)
9. Status of FCC Form 1200 Filing (enter an "x" in the appropriate box)		YES	NO
a. Has an FCC Form 1200 been previously filed with the FCC?		<u> </u>	
	If yes, enter the date filed;	07/29/94	(mm/dd/yy)
		YES	NO
b. Has an FCC Form 1200 been previously filed with the Franchising Authorit	y?	X	
	If yes, enter the date filed:	07/29/94	(mm/dd/yy)
10. Cable Programming Services Complaint Status (enter an "x" in the a	ppropriate box)		
a, Is this form being filed in response to an FCC Form 329 complaint?		YES	NO X
	If yes, enter the date of the complaint;	 	(mm/dd/yy)
	in yes, once the tale of the complaint.	·····	
11. Is FCC Form 1205 Being Included With This Filing		YES	NO X
12. Selection of "Going Forward" Channel Addition Methodology (enter	an "x" in the appropriate box)		
Check here if you are using the original rules [MARKUP METHOD].			
Check here if you are using the new, alternative rules [CAPS METHOD	P].		
If using the CAPS METHOD, have you elected to revise recovery for channels added during the period May 15, 1994 to Dec. 31, 1994?		YES	NO
13. Headend Upgrade Methodology •NOTE: Operators must certify to the Commission their eligibility to use this upgrade	methodology and attach an equipment list and depre	ciation schedule.	

Check here if you are a qualifying small system using the streamlined headend upgrade methodology.

Т

Part I: Preliminary Information

				m Previous Filing		
		B	b	c	d	e
ine	Line Description	Basic	Tier 2	Tier 3	Tier 4	Tier 5
1 Current M	Maximum Permitted Rate	\$50,3623	\$0.0000	\$0.0000		
			Module B: Subscribershi	р		
		•	ь	¢	d	e
ine	Line Description	Basic	Tier 2	Tier 3	Tier 4	Tier 5
	Subscribership For True-Up Period 1	235	0	0		
	Subscribership For True-Up Period 2					
3 Estimated	d Average Subscribership For Projected Period	219	0	0		
	· · · · · · · · · · · · · · · · · · ·		dule C: Inflation Inform			
1704	Line Description					
line 1 Unclaime	Line Description d Inflation: Operator Switching From 1210 To 1240	· · · · · · · · · · · · · · · · · · ·				1.00
l Unclaime	d Inflation: Operator Switching From 1210 To 1240	Complaint				1.00
1 Unclaime 2 Unclaime		Complaint				1.00
1 Unclaime 2 Unclaime 3 Inflation	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C	Complaint				1.00
1 Unclaime 2 Unclaime 3 Inflation 4 Inflation	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1]	Complaint				1.00
Unclaime 2 Unclaime 3 Inflation 24 Inflation	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1]		le D: Calculating the Ba	se Rate		1.00 1.00 1.01
1 Unclaime 2 Unclaime 3 Inflation 4 Inflation	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1] CC Inflation Factor		ile D: Calculating the Ba	se Rate	d	1.00
Unclaime Unclaime Inflation Inflation Current F	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1] CC Inflation Factor Line Description	Modu	ile D: Calculating the Ba b Tier 2		d Tier 4	1.00 1.01
Unclaime Unclaime Inflation Inflatio	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1] CC Inflation Factor Line Description Headend Upgrade Segment	Modu Basic	b	c	-	1.0 1.0 1.0
Unclaime Unclaime Unclaime Inflation Inflation Current F Inflation Current F Current F	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1] CC Inflation Factor Line Description Headend Upgrade Segment External Costs Segment	Modu	b	c	-	1.00 1.01 1.01
Unclaime Unclaime Unclaime Inflation Inflation Current F Current F Current F Current F Current F	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1] CC Inflation Factor Line Description Headend Upgrade Segment External Costs Segment Caps Method Segment	Modu Basic	b	c	-	1.0 1.0 1.0
Unclaime Unclaime Unclaime Inflation Inflation Current F I Current F Current F Current F Current A Current A	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1] 'CC Inflation Factor Line Description Headend Upgrade Segment External Costs Segment Saps Method Segment Markup Method Segment	Modu Basic	b	c	-	1.0 1.0 1.0
Unclaime Unclaime Unclaime Unclaime Inflation Inflation Inflation Current F Current I Current I Current I Current I Current I Current I Current C	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1] CC Inflation Factor Line Description Headend Upgrade Segment External Costs Segment Caps Method Segment Carkup Method Segment Channel Movement and Deletion Segment	Modu Basic \$3.0243	b	c	-	1.0 1.0 1.0
Unclaime Unclaime Unclaime Inflation Inflation Current F Current F Current F Current C Current C Current C Current C Current C Current C	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1] CC Inflation Factor Line Description Headend Upgrade Segment External Costs Segment Sternal Costs Segment Caps Method Segment Carkup Method Segment Cannel Movement and Deletion Segment True-Up Segment	Modu a Basic \$3.0243 \$33.8112	b	c	-	1.0 1.0 1.0
Unclaime Unclaime Unclaime Inflation Inflation Current F Current I	ed Inflation: Operator Switching From 1210 To 1240 ed Inflation: Unregulated Operator Responding to Rate C Factor For True-Up Period 1 [Wks 1] Factor For True-Up Period 2 [Wks 1] CC Inflation Factor Line Description Headend Upgrade Segment External Costs Segment Caps Method Segment Carkup Method Segment Channel Movement and Deletion Segment	Modu Basic \$3.0243	b	c	-	1.00 1.01 1.01

Part II: True-Up Period Module E: Timing Information

L	ine Line Description	
E	What Type of True-Up Is Being Performed? (Answer "1", "2", or "3". See Instructions for a description of these types.)	2
Ē	If "1", go to Module I. If "2", answer E2 and E3. If "3", answer E2, E3, E4, and E5.	
E	2 Number of Months in the True-Up Period 1	12
E	3 Number of Months between the end of True-Up Period 1 and the end of the most recent Projected Period	0
E	A Number of Months in True-Up Period 2 Eligible for Interest	
E	5 Number of Months True-Up Period 2 Ineligible for Interest	

Module F: Maximum Permitted Rate For True-Up Period 1

		a	b	c	d	e
Line	Line Description	Basic	Tier 2	Tier 3	Tier 4	Tier 5
Fl	Caps Method Segment For True-Up Period 1 [Wks 2]					
F2	Markup Method Segment For True-Up Period 1 [Wks 3]					
F3	Chan Mymnt Deletn Segment For True-Up Period 1 [Wks' 4/5]					
F4	True-Up Period 1 Rate Eligible For Inflation [D8+F1+F2+F3]	\$13.2733				
F5	Inflation Segment for True-Up Period 1 [(F4*C3)-F4]	\$0,2260			<u></u>	
F6	Headend Upgrade Segment For True-Up Period 1 [Wks 6]					
F7	External Costs Segment For True-Up Period 1 [Wks 7]	\$3.0243				
F8	True-Up Segment For True-Up Period 1	\$33,8112				
F9	Max Perm Rate for True-Up Period 1 [F4+F5+F6+F7+F8]	\$50.3348				

Module G: Maximum Permitted Rate For True-Up Period 2

		L	b	c	d	e
Line	Line Description	Basic	Tier 2	Tier 3	Tier 4	Tier 5
GI	Caps Method Segment For True-Up Period 2 [Wks 2]					
G2	Markup Method Segment For True-Up Period 2 [Wks 3]					
G3	Chan Mymnt Deletn Segment For True-Up Period 2 [Wks' 4/5]					
G4	TU Period 2 Rate Eligible For Inflation [D8+F5+G1+G2+G3]					
G5	Inflation Segment for True-Up Period 2 [(G4*C4)-G4]					
G6	Headend Upgrade Segment For True-Up Period 2 [Wks 6]					
<u>G</u> 7	External Costs Segment For True-Up Period 2 [Wks 7]					
G8	True-Up Segment For True-Up Period 2					
G9	Max Perm Rate for True-Up Period 2 [G4+G5+G6+G7+G8]	\$0,0000	\$0.0000	\$0.000	\$0,0000	\$0,000

Module H: True-Up Adjustment Calculation

		8	Ь	c	d	e
Line	Line Description	Basic	Tier 2	Tier 3	Tier 4	Tier 5
Adjustm	ent For True-Up Period 1					
H1 Re	evenue From Period 1	\$26,336.45				
H2 Re	evenue From Max Permitted Rate for Period 1	\$141,944.03				
H3 Tr	ue-Up Period 1 Adjustment [H2-H1]	\$115,607,58				
H4 Int	terest on Period 1 Adjustment	\$6,502.93				
Adjustm	aent For True-Up Period 2					
H5 Re	evenue From Period 2 Eligible for Interest	\$0,00				
H6 Re	evenue From Max Perm Rate for Period 2 Eligible For Interest	\$0,00				
H7 Pe	riod 2 Adjustment Eligible For Interest [H6-H5]	\$0,00				
H8 Int	terest on Period 2 Adjustment (See instructions for formula)	\$0.00				
H9 Re	evenue From Period 2 Ineligible for Interest	\$0.00				
HIO Re	evenue From Max Perm Rate for Period 2 Ineligible for Interest	\$0,00				
HII Pe	riod 2 Adjustment Ineligible For Interest [H10-H9]	\$0.00	-			
Total Tr	ve-Up Adjustment					
H12 Pre	evious Remaining True-Up Adjustment					
HI3 To	tal True-Up Adjustment [H3+H4+H7+H8+H11+H12]	\$122,110.51				
HI4 An	nount of True-Up Claimed For This Projected Period	\$122,110,51				
H15 Re	maining True-Up Adjustment [H13-H14]	\$0.00				

Part III: Projected Period

Module I: New Maximum Permitted Rate

		8	b	¢	d	e
Line	Line Description	Basic	Tier 2	Tier 3	Tier 4	Tier 5
[]	Caps Method Segment For Projected Period [Wks 2]					
12	Markup Method Segment For Projected Period [Wks 3]					
[J	Chan Mymnt Deletn Segment For Projected Period [Wks 4/5]					
14	Proj. Period Rate Eligible For Inflation [D8+F5+G5+I1+I2+I3+W	\$13.4993				
15	Inflation Segment for Projected Period [(I4*C5)-I4]	\$0.2578				
16	Headend Upgrade Segment For Projected Period [Wks 6]			4		
17	External Costs Segment For Projected Period [Wks 7]	\$3.0977				
[8	True-Up Segment For Projected Period	\$46.4652				
19	Max Permitted Rate for Projected Period [I4+I5+I6+I7+I8+Wks]	\$63,3200				
110	Operator Selected Rate For Projected Period	\$ 63.32				

Certification Statement WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE TITLE 18, SECTION 1001), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

ORFEITURE (U.S. CODE, TITLE 47, SECTION 503).
and correct to the best of my knowledge and belief, and are made in good faith.
Date
10/28/2010
Karen Conaty Director, Budgets & Analysis
Fax Number
(315) 234-0251

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Worksheet 1 - True-Up Period Inflation

For instructions, see Appendix A of Instructions For FCC Form 1240

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Line	Period	FCC Inflation Factor
101	Month 1	1.08%
102	Month 2	1.08%
103	Month 3	1.08%
104	Month 4	1.91%
105	Month 5	1.91%
106	Month 6	1.91%
107	Month 7	1.91%
108	Month 8	1.91%
109	Month 9	1.91%
110	Month 10	1.91%
111	Month 11	1.91%
112	Month 12	1.91%
113	Average Inflation Factor for True- Up Period 1	1.0170
114	Month 13	
115	Month 14	
116	Month 15	
117	Month 16	, , <u> </u>
118	Month 17	
119	Month 18	
120	Month 19	
121	Month 20	
122	Month 21	
123	Month 22	
124	Month 23	
125	Month 24	

Average Inflation Factor for True-Up Period 2

					True-Up Period	Projected Period
<u> </u>		1			· · ·	Fiojected Feilod
Juesti	on 1. For which time period are you filling out this works	neet? [Put an "X" in th	e appropriate box.]		X	
Juestia	on 2. How long is the first period, in months, for which ra	ates are being set with t	his worksheet?			12
	on 3. How long is the second period, in months, for which					12
Quosa		in takes are being set with	at and worksheet:			
		a	ь	c	d	
Line	Line Description	Basic	Tier 2	Tier 3	u Tier 4	Tier 5
			riod 1	11070		
Frier	nal Costs Eligible for Markup					
CALCI	Cost of Programming For Channels Added Prior			1		
701		AC 111 -11				
701	to 5/15/94 or After 5/15/94 Using Markup Method For Period	\$6,666.76				
702					<u> </u>	
	Retransmission Consent Fees For Period					
703	Copyright Fees For Period	\$1,266.74		· · · ·		
704 705	External Costs Eligible For 7.5% Markup	\$7,933.51				
_	Marked Up External Costs	\$8,528.5190				
	nal Costs Not Eligible for Markup					
706	Cable Specific Taxes For Period					
707	Franchise Related Costs For Period	\$0.00				
708	Commission Regulatory Fees For Period	\$0.00				
708.1	Price Cap Allowance per Section III.F.4.a of Time					
	Warner Social Contract					
709	Total External Costs For Period	\$8,528,5190				
710	Monthly, Per-Subscriber External Costs For	\$3.0243				
	Period I					
		Pe	eriod 2			
Exter	nal Costs Eligible for Markup					
	Cost of Programming For Channels Added Prior					
71 E	to 5/15/94 or After 5/15/94 Using Markup					
	Method For Period					
712	Retransmission Consent Fees For Period					
713	Copyright Fees For Period					
714	External Costs Eligible For 7.5% Markup					
715	Marked Up External Costs					
Exter	nal Costs Not Eligible for Markup					
716	Cable Specific Taxes For Period					
717	Franchise Related Costs For Period					
718	Commission Regulatory Fees For Period					
718.1	Price Cap Allowance per Section III.F.4.a of Time					
	Warner Social Contract					
719	Total External Costs For Period					

Т

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sts F(
al Co		
Sktern		
iber E		
720 Monthly, Pet-Subscriber External Costs For Period 2		
Per-S		
thly, l d 2		
Mon. Perio		
72(

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or ins	structions, see Appendix A of Instructions For FCC For	n 1240				Designed Design
					True-Up Period	Projected Period
Questio	on 1. For which time period are you filling out this work	sheet? [Put an "X" in the	appropriate box.]			x
-	on 2. How long is the first period, in months, for which on 3. How long is the second period, in months, for whi	-				12
						· · · · · · · · · · · · · · · · · · ·
Line	Line Description	a Basic	b Tier 2	c Tier 3	d Tier 4	e Tier 5
		Pe	riod 1	· · · · ·		
Exter	rnal Costs Eligible for Markup					
701	Cost of Programming For Channels Added Prior to 5/15/94 or After 5/15/94 Using Markup Method For Period	\$6,383.41				
702	Retransmission Consent Fees For Period					
703	Copyright Fees For Period	\$1,189.43				
704	External Costs Eligible For 7.5% Markup	\$7,572.84				
705	Marked Up External Costs	\$8,140,8082				
Exter	rnal Costs Not Eligible for Markup					
706	Cable Specific Taxes For Period					
707	Franchise Related Costs For Period					
708	Commission Regulatory Fees For Period	\$0.00				
708.1	Price Cap Allowance per Section III.F.4.a of Time Warner Social Contract	\$0.00				
709	Total External Costs For Period	\$8,140.8082				
710	Monthly, Per-Subscriber External Costs For Period 1	\$3.0977				

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Worksheet 8 - True-Up Rate Charged

For instructions, see Appendix A of Instructions For FCC Form 1240

Question 1. How long is the True-Up Period 1, in months? Question 2. How long is the True-Up Period 2, in months?

		a	b	с	d	e
Line	Line Description	Basic	Tier 2	Tier 3	Tier 4	Tier 5
801	Month 1	\$8.5600				
802	Month 2	\$9.4100				
803	Month 3	\$9.4100				
804	Month 4	\$9.4100				
805	Month 5	\$9.4100				
806	Month 6	\$9.4100				
807	Month 7	\$9.4100				
808	Month 8	\$9.4100				
809	Month 9	\$9.4100				
810	Month 10	\$9.4100				
811	Month 11	\$9.4100				
812	Month 12	\$9.4100			····	
813	Period 1 Average R	\$9.3392				
				•	•	
814	Month 13					
815	Month 14					
816	Month 15					
817	Month 16					
818	Month 17					
819	Month 18					
820	Month 19					
821	Month 20					
822	Month 21					
823	Month 22					
824	Month 23					
825	Month 24					
826	Period 2 Average R					



1

Q4 Carthage Marketing Channel Lineup

Ch. No.	Call Sign	Name	Classification
2	WNYF	WNYF (FOX, Watertown)	Basic
3	WSTM	WSTM	Basic
4	WWNY	WWNY	Basic
5	WWTI	WWTI	Basic
7	TWCS	Time Warner Cable Sports	Basic
8	WPBSDT	WPBS DT	Basic
9	TBS	TBS	Basic
10	YNN	YNN	Basic
11	CKWS	CKWS-TV/CH#11	Basic
12	WGN AMER	WGN America	Basic
13	CJOH	CJOH - TV / CH # 13	Basic
14	WWTIDT2	WWTI-DT2 (The North Country CW)	Basic
95	TVGN	TV Guide Network	Basic
96	CSI	Cable System Information	Basic
99	PUBLIC	Public Access	Basic

Jefferson/Lewis Counties Rates & Services

A.	Basic Service:	Ê0 44
н.		\$9.41 67.75
	Standard Service: (Consists of Basic Service @ \$9.41/mo.	67.75
	+ all Standard channels @ \$58.34/mo.)	
В.	Premium Services:*	
	HBO, Cinemax, Showtime Unlimited with On Demand Service	
	1 st Premium Service	13.95
	2 nd Premium Service	10.95
	3 rd Premium Service	10.95
	Starz	11.75
	Digital equipment required to receive these Premium Services.	
C.	Digital Cable Services†	
	Digital Navigator	1.00
	Explorer Pak	8.95
	Movie Pak	7.25
	High-Definition Package	5.95
	(An HD television and an HD terminal is required.)	
	Sports Plus Package	3.95
	Latino Especial Package	9.95
	Digital Video Recorder (DVR) Service (Per Terminal)	10.95
	Family Choice	12.99
	(Basic Cable service and leFase of a digital set-top box requi Standard Cable Service, Premium channels, On Demand ser and some interactive services are not available with Family C Other restrictions apply.)	vices
D.	Equipment:	
	Home Terminal/Digital Terminal/HD Terminal	7.00
	Remote/Digital Remote	.34
	Non-Addressable Converter	.22
	CableCARD ^{**} ⁺⁺ (for Digital Cable-ready sets)	2.50
Ε.	Installation Charges:**	
	Standard Install/Reconnect (pre-wired home)	42.64
	Standard Installation (unwired home)	61.55
	Additional Outlet(s) at time of initial installation	29.39
	Additional Outlet(s) separate trip	43.19
	Equipment Deactivation Fee	5.99
	COD Fee (Fee for payments received at time of install)	5,95
	Payment Processing Fee (by phone; non automated)	5.00
	**Sales tax will be applied to installation charges	

† Bigital Terminal in required in order to receive some channels and/or services, Ratue and charges apply to standard residential installations and service. The above rotes for cable service packages and equipment do not include franchise fees or State and Federal regulatory fees.

 $\uparrow\uparrow$ Net all charactic available with a CableCARDTM.

340 Eastern Blvd., Watertown NY 13601 • (315) 782-5240 (315) 439-3520 • 1 (800) 439-1113 www.timewarnercable.com



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