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

SA1-2E Short Form

STATEMENT OF ACCOUNT	FOR COPYRIGH	T OFFICE USE ONLY	Return completed workboo by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u>
General instructions are located in the first tab of this workbook	08/22/2018	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at Tel: (202) 707-8150

A	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2018/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31 Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.	
Owner		List any other name or names under which the owner conducts the business of the cable system.	
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.	
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	63206
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		F J Communications, Inc.	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		65 W Third Street P O Box 40 (Number, street, rural route, apartment, or suite number)	
		Fort Jennings, OH 45844 (City, town, state, zip)	
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system us already appear in space B. In line 2, give the mailing address of the system, if different from the address given in	
System	1	IDENTIFICATION OF CABLE SYSTEM:	
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
		(City, town, state, zip code)	
L			

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

		FORM SA1-2E. PAG
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
	F J Communications, Inc.	632
	Instructions: List each separate community served by the cable system. A "com	munity" is the same as a "community unit" as defined in FCC rule
D	"a separate and distinct community or municipal entity (including unincorporate discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that y as the "first community." Please use it as the first community on all future filing	you list will serve as a form of system identification hereafter kno ys.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mol identified city.	bile home parks should be reported in parentheses below the
		STATE
First	FORT JENNINGS	ОН
Community	JACKSON TWP	ОН
	SUGAR CREEK TWP	ОН
d Rows as Necessary	DELPHOS	OH
	JENNINGS TWP	ОН
	MARION TWP	ОН

	LEGAL NAME OF OWNER OF CA	ARI E SYSTEM						FORM SA1	TEM ID
Name	F J Communications, In							010	6320
	F J Communications, in	ι.							
Е	SECONDARY TRANSMISSION								
L	In General: The information in s system, that is, the retransmission								
Secondary	about other services (including p								
Transmission	last day of the accounting period								
Service: Sub- scribers and	Number of Subscribers: Both down by categories of secondary								
Rates	each category by counting the n	•				•			
	separately for the particular serv							a and the	
	Rate: Give the standard rate c unit in which it is generally billed								
	category, but do not include disc	ounts allowed	for adva	nce payment.	-				
	Block 1: In the left-hand block								
	systems most commonly provide that applies to your system. Note								
	categories, that person or entity	should be cour	nted as a	a subscriber ir	n each appl	icable category	. Example:	a residential	
	subscriber who pays extra for ca					in the count un	der "Servio	e to the	
	first set" and would be counted of Block 2: If your cable system I					service that are	different fr	om those	
	printed in block 1 (for example, t								
	with the number of subscribers a	and rates, in the	e right-ha	and block. A t	wo- or three	e-word descripti	on of the s	ervice is	
	sufficient.	DCK 1					BLOCK	(2	
		NO. OF		DATE	CAT			NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CAT	EGORY OF SE	RVICE	SUBSCRIBERS	RAT
	Service to first set		505	\$59.50	IPTV			188	\$74.0
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	SIONS: RATE	S				
F	In General: Space F calls for rat	•	,		•				
•	not covered in space E, that is, the service for a single fee. There are								
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the un		usually I	billed. If any r	ates are ch	arged on a vari	able per-pr	ogram basis,	
Secondary Fransmissions:	enter only the letters "PP" in the Block 1: Give the standard rat		he cable	system for ea	ach of the a	applicable servio	ces listed.		
Rates	Block 2: List any services that	your cable sys	stem furr	nished or offer	ed during t	he accounting p	period that		
	listed in block 1 and for which a s brief (two- or three-word) descrip				ished. List	these other serv	vices in the	form of a	
	bhei (two- of three-word) descrip			le ior each.					
	CATEGORY OF SERVICE	BLO RATE		ORY OF SEF		RATE	CATEG	BLOCK 2 ORY OF SERVICE	RAT
							UATEO		
			Installa	tion: Non-res	sidentiai				
	Continuing Services: • Pay cable	\$12.00		tion: Non-re: el, hotel	sidential		EXPAN	IDED BASIC	\$5.0
	Continuing Services:		• Mot		sidential			IDED BASIC XPANDED	
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	\$12.00	• Mot • Con • Pay	el, hotel nmercial cable					
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	\$12.00	• Mot • Con • Pay • Pay	el, hotel nmercial cable cable-add'l c					\$5.(\$12.(
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	\$12.00 \$16.00	• Mote • Con • Pay • Pay • Fire	el, hotel nmercial cable cable-add'l c protection	hannel				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	\$12.00	• Mot • Con • Pay • Pay • Fire • Burg	el, hotel nmercial cable cable-add'I c protection glar protectior	hannel				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	\$12.00 \$16.00	• Mot • Con • Pay • Pay • Fire • Burg	el, hotel nmercial cable cable-add'l c protection glar protectior services:	hannel				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	\$12.00 \$16.00	• Mote • Con • Pay • Pay • Fire • Burg Other s • Rec	el, hotel nmercial cable cable-add'l c protection glar protectior services: connect	hannel				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	\$12.00 \$16.00	• Mot • Con • Pay • Pay • Fire • Burg Other s • Rec • Disc	el, hotel nmercial cable cable-add'l c protection glar protectior services:	hannel				

lame	LEGAL NAME OF OWNER O			SYSTEM IE 6320
	F J Communications	•		
G imary smitters: evision	In General: In space G, idd carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station her station was carried <i>only</i> or • List the station here, and basis. For further informatic Column 1: List each station	entify every television station (including t em during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th (e)(2) and (4), or 76.63 (referring to 76.63 as explained in the next paragraph. s: With respect to any distant stations ca rules, regulations, or authorizations: re in space G—but do list it in space I (th	(1) stations carried only on a part- ne carriage of certain network program (e)(2) and (4))]; and (2) certain state arried by your cable system on a sum ne Special Statement and Program d both on a substitute basis and als see page (v) of the general instruct program services such as HBO, ES	-time basis under rams [sections ations carried on a ubstitute program u Log)—if the so on some other stions. iPN, etc. Identify each
	"WETA-2" as the same on Column 2: Give the chann of license. For example, W Column 3: Indicate in eacl educational station, by entr (for independent multicast) For the meaning of these to Column 4: Give the location FCC. For Mexican or Cana	the form. hel number the FCC assigned to the telev VRC is channel 4 in Washington, D.C. h case whether the station is a network s ering the letter "N" (for network), "N-M" (f), "E" (for noncommercial educational), o erms, see page (iv) of the general instru- on of each station. For U.S. stations, list adian stations, if any, give the name of th	vision station for broadcasting over station, an independent station, or for network multicast), "I" (for indep or "E-M" (for noncommercial educal ictions in the paper SA1-2 form. the community to which the station ne community with which the statio	r the air in its community a noncommercial bendent), "I-M" tional multicast). n is licensed by the n is identified.
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WBGU	27	E	BOWLING GREEN-LIMA OHIO
	WBGU WBGU	27.2	E-M	BOWLING GREEN-LMA OHIO
as Necessary		27.2 27.3	E-M E-M	
Necessary	WBGU	27.2	E-M	BOWLING GREEN-LMA OHIO
Necessary	WBGU WBGU	27.2 27.3	E-M E-M	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO
Necessary	WBGU WBGU WLIO	27.2 27.3 8.1	E-M E-M N-M	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO
Necessary	WBGU WBGU WLIO WLIO	27.2 27.3 8.1 8.2	E-M E-M N-M I-M	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO
Necessary	WBGU WBGU WLIO WLIO WOHL	27.2 27.3 8.1 8.2 35.1	E-M E-M N-M I-M N-M	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO
Necessary	WBGU WBGU WLIO WLIO WOHL WOHL	27.2 27.3 8.1 8.2 35.1 35.2	E-M E-M N-M I-M N-M	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO
Vecessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW	27.2 27.3 8.1 8.2 35.1 35.2 44	E-M E-M N-M I-M N-M I	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO
Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2	E-M E-M N-M I-M N-M I I I I-M	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO
s Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
s Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
as Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
as Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
as Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
as Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
as Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
as Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
as Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
as Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO TOLEDO OHIO
s as Necessary	WBGU WBGU WLIO WLIO WOHL WOHL WTLW WTLW WTOL	27.2 27.3 8.1 8.2 35.1 35.2 44 44.2 11	E-M E-M N-M I-M N-M I I I I-M N	BOWLING GREEN-LMA OHIO BOWLING GREEN-LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO LIMA OHIO

EGAL NAME OF F J Commur			/STEM:					SYSTEM I 632
	t every radio s	station ca	arried on a separate and disc nerally receivable by your cal					н
eceivable if (1) on the basis of For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: G	it is carried by monitoring, to prmation about m. dentify the call tate whether to the radio stat this by placing tive the station	y the sys be recein at the Co I sign of a the static ion's sig g a check n's locati	I-Band FM Carriage: Under stem whenever it is received a ived at the headend, with the opyright Office regulations on each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which t	at the system's he system's FM anto this point, see pa sed by the cable s he station is licen	eadend, and (2 enna, during c ige (v) of the g system as a se sed by the FC	2) it can ertain st general i eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN		-			1	8/D		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	d: 2018/1						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	FEM:					SYSTEM ID#
Name	F J Communications,	nc.						63206
	SUBSTITUTE CARRIAGI	E: SPECIA		NT AND PROGRAM LO	G			
I	In General: In space I, identi substitute basis during the a	ccounting pe	eriod, under spe	cific present and former FC	C rules, regul	ations, or au	thorizations.	For a further
Substitute	explanation of the programm				e general instr	uctions in the	e paper SA1	-2 form.
Carriage: Special	1. SPECIAL STATEMEN							
Statement and	During the accounting per	•	r cable system	carry, on a substitute basi	s, any nonne	twork televis		
Program Log	broadcast by a distant star	tion?					YES	× NO
	Note: If your answer is "No'	, leave the	rest of this pag	e blank. If your answer is '	'Yes," you mι	ist complete	the program	n
	log in block 2.							
	2. LOG OF SUBSTITUTE	PROGRA	MS					
	In General: List each subst				wherever pos	sible, if thei	r meaning is	
	clear. If you need more spa			ows to the tables. sion program ("substitute	orogram") tha	t during the		
	period, was broadcast by a							
	under certain FCC rules, re							
	Do not use general categor		vies" or "baske	tball." List specific program	n titles, for exa	ample, "I Lo	ve Lucy" or	
	"NBA Basketball: 76ers vs.		logat liva anta	"Yes." Otherwise enter "N	lo."			
				sting the substitute progra				
	Column 4: Give the broa	dcast statio	on's location (th	e community to which the	station is lice		FCC or, in	
	the case of Mexican or Can							- 41-
	first. Example: for May 7 giv		when your syst	em carried the substitute p	orogram. Use	numerals, v	with the mor	hth
			substitute pro	gram was carried by your	cable svstem.	List the tim	es accurate	lv
	to the nearest five minutes.							5
	stated as "6:00-6:30 p.m."							
	to delete under FCC rules a			was substituted for progra				
	was substituted for program							am
	effect on October 19, 1976.	0 ,	5			0		
	s	UBSTITUT	E PROGRAM			N SUBSTI		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	-	IMES — TO	DELETION
							—	
							_	
							_	
						·		

Accounting Period:	2018/1			FORM S	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: F J Communications, Inc.				63206
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file a all amounts (gross receipts) paid to your cable system by subscribers for the (as identified in space E) during the accounting period. For a further explanal page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period	system's s tion of how	secondary trans to compute this	mission servi s amount, see \$ 26	ce
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 • Use block 3 if the amount of gross receipts in space K is more than \$263,800 See page (vi) of the general instructions located in the paper SA1-2 form for more) but less t	han \$527,600	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$13	7,100 OR	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royal accounting period is \$52.00	, ,			
	Line 1. Royalty fee for accounting period Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lin	nes 1 and 2	2		
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LE	SS (but m	ore than \$137,	100)	
	1. Base amount under statutory formula	\$	263,800.00		
	2. Enter amount of gross receipts from space K				
	3. Subtract line 2 from line 1				
	Enter the amount of gross receipts from space K				
	5. Enter the amount from line 3				
	6. Subtract line 5 from line 4				
	7. Multiply line 6 by .005 (enter figure here)				
	8. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7	' and 8			
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	3,800 (but	less than \$527	(,600)	
	1. Enter the amount of gross receipts from space K	\$	264,112.50		
	2. Base amount under statutory formula	\$	263,800.00		
	3. Subtract line 2 from line 1	\$	312.50		
	4. Multiply line 3 by .01		\$	3.13	
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)		\$	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8			0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4	, 5, and 6 .		\$	1,322.13
	FILING FEE AND TOTAL REMITTANCE DU	JE			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	1,322.13	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)		\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	1,342.13
	Important: Your remittance must be in the form of an electronic pays See page i of the general instructions in the paper SA1		-		ghts!

Accounting Period:	2018/1								FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER F J Communications								SYSTEM II 6320
M Channels	 CHANNELS Instructions: You must to its subscribers, and the subscribers, and the system carried televise 2. Enter the total numb on which the cable sy and nonbroadcast set 	(2) the cable system's er of channels on whi sion broadcast station er of activated channer rstem carried television	s total nun ch the cal s els n broadca	mber of a able	activated channels du	iring the a			11 46
N Individual to Be Contacted	INDIVIDUAL TO BE C we can contact about t			FORMAT	ION IS NEEDED (Ide	entify an ir	ndividual to whom		
for Further Information	Name MIC	HAEL METZGE	R				Telephone	419-286-218	31
	(Numl FOI	N THIRD STREE ber, street, rural route, apa RT JENNINGS O town, state, zip)	artment, or s		ber)				
	Email	mike@fjteleph	none.com	n			Fax (optional) 419-286-21	93	
	CERTIFICATION (This s	statement of account i	must be c	certified a	and signed in accorda	ance with	Copyright Office regulations)		
O Certification	(Agent of ow in line 1 c X (Officer or p in line 1 c	r than corporation or mer other than corpo of space B and that the martner) I am an officer of space B. atement of account and correct to the best of m	partnersh ration or I owner is i (if a corpo	hip) I am partners not a corp oration) o declare un	the owner of the cable hip) I am the duly aut poration or partnership or a partner (if a partner ander penalty of law that	horized ag b; or ership) of th at all stater	as identified in line 1 of space F ent of the owner of the cable s ne legal entity identified as own ments of fact contained herein e in good faith.	ystem as identifie	
				an electro	Aichael A Metzge nic signature on the lir using an "/s/ signature	ne above to	o certify this statement. ' John Smith)	-	
		Typed or printe	ed name:	: MIC	CHAEL A METZ	GER			
		Title: (Title o			S-GENERAL M		ER		
		Date:					FEBRUARY 27, 2018		

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

inting Period: 2018/1	FORM SA1-2E. PAGE
NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
Communications, Inc.	632
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 located in the paper SA1-2 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 Statemen Concerning Gros Receipts Exclusio
YES. Enter the total here and list the satellite carrier(s) below	_
Name Name	
Mailing Address Mailing Address	
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 located in the paper SA1-2 form.	La Interest Assessme
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