## THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2015

If you are filing for a prior accounting period, contact the Licensing Division for the correct form,

## STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are at the end of this form [pages (i)-(vii)].

FOR COPYRIGH	IT OFFICE USE ONLY		
DATE RECEIVED AMOUNT			
8/28/2019	\$ ALLOCATION NUMBER		

### SA1-2 Short Form

Return to: Library of Congress Copyright Office Licensing Division 101 Independence Ave. SE Washington, DC 20557-6400 (202) 707-8150.

For courier deliveries, see page it of the general instructions.

A Accounting Period	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (Check one of the boxes and fill in the year date.)    July 1-December 31						
<b>B</b> Owner	INSTRUCTIONS: Give the full legal name of the owner of the cable system in line 1, If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.  In line 2, list any other 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 subside a single statement of account and royalty fee payment covering the entire accounting period.  Check here if this is the system's first filling. If not, enter the system's ID number assigned by the Licensing Division. 63393  LEGAL NAME OF OWNER OF CABLE SYSTEM:  VERNEAU NETWORKS, INC. 63393						
	3 MAILING ADDRESS OF OWNER OF CABLE SYSTEM: 121 MILL ST., PO BOX 427 (Number, street, rural route, apartment, or suite number) HILLSBORO, WI 54634-0427 (Ciry, town, state, zip)						
<b>C</b> 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.  IDENTIFICATION OF CABLE SYSTEM:						
	MAILING ADDRESS OF CABLE SYSTEM:  (Number, street, nural route, apartment, or suite number) (City; town, state, zip)						
D Area Served	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. §76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.  Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city.						
First > Community	CITY OR TOWN         STATE         CITY OR TOWN         STATE           HILLSBORO         WI         JUNEAU         WI           MONROE         WI         SAUK         WI           VERNON         WI         WI         WI						

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: VERNÉAU NETWORKS, INC.			63393	Name:
n FCC rules: "a separate and distinct on the areas and including single, discrete uning if system identification hereafter known Note: Entitles and properties such as hotel	ommunity or municipal enti corporated areas)." 47 C.F.I as the "first community." P	item. A "community" is the same as a "community (including unincorporated communities R. §76.5(dd). The first community that you I lease use it as the first community on all fut s, or mobile home parks should be reported in	within unincorporated list will serve as a form ure filings.	D Area Served
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Secondary Transmission Service: Subscribers and Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

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

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

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

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

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

BLOCK	1	BLOCK 2	2		
CATEGORY OF SERVICE	NO, OF SUBSCRIBERS	RATE	GATEGORY OF SERVICE	NO, OF SUBSCRIBERS	RATE
Residential:  • Service to first set	235	\$58.99	BASIĆ	20	\$58.99
Service to additional set(s)	277	\$7.00	PREMIUM		\$74.99
•FM radio (if separate rate)			PREMIUM PLUS	204	\$106.79
Motel, hotel					
Commercial	55				
Converter				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
<ul> <li>Residential</li> </ul>		5- 5- 5-			
<ul> <li>Nonresidential</li> </ul>			<b> </b>  -:-/-:-/-:		

# F

Services Other Than Secondary Transmissions: Rates

## SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

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

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

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

BLOCK 1			BLOCK 2		
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
Pay cable	y - v + + · -	Motel, hotel.			
Pay cable-add'l channel	. , , . , , .	Commercial		,	
Fire protection		Pay cable			
Burglar protection		- Pay cable-add'l channel			
Installation: Residential		Fire protection			
First set		Burglar protection	ļ.,,.,,,		
Additional set(s)	- 1 - 2 - 1 - 1 - 1	Other Services:			
FM radio (if separate rate)		- Reconnect			4,11444
Converter		- Disconnect			
		Outlet relocation			,,-,,-,
		Move to new address			4344540

		T
LEGAL NAME OF OWNER OF CABLE SYSTEM:		Name
VERNEAU NETWORKS, INC.	63393	

### 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 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.

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 "WETA-2" as the same on the form. Simulcast stations must be reported in column 1 (list each station separately; for example, WETA-2-simulcast).

Column 2: Give the channel number the FCC 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.

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 noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions.

Column 4: 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.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4, LOCATION OF STATION
WISC	3	N	MADISON, WI
WKBT	8	N	LACROSSE, WI
WEAU	13	N	EAU CLAIRE, WI
WMTV	15	N	MADISON, WI
WXOW	19	N	LACROSSE, WI
WHA	21	E	MADISON, WI
KQEG	23	I	LÄCRESENT, MN
WLAX	25	N	LACROSSE, WI
WKOW	27	N	MÄDISON, WI
W43BR	43	1	BARABOO, WI

G

Primary Transmitters: Television

								PONIVI SA 1-2, PAGE 4
Name	LEGAL NAME OF O							63393
<b>F</b>	PRIMARY TRANSMITTERS: RADIO In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.  Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally							
Transmitters: Radio	receivable if ( the basis of m detailed infon Column 1: Column 2: Column 3: signal, indica	1) it is carried tonitoring, to mation about Identify the State wheth If the radio at this by plate Give the state wheth Give the state wheth If the radio at this by plate Give the state this by plate the state the sta	by the be rec t the the call sing er the station cing a	ng All-Band FM Carnage: one system whenever it is received at the headend, with the Copyright Office regulation of each station carried. It is a station is AM or FM. It is signal was electronically to check mark in the "S/D" of location (the community with we have the community with the community wi	ved at the system's FM ons on this poli- processed by to dumn, which the stat	em's headen I antenna, du nt, see page the cable sys- ion is license	id; and uring of (iv) of stem a	d (2) it can be expected, on certain stated intervals. For the general instructions. as a separate and discrete
	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
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ORM SA1-2, PAGE 5.							
LEGAL NAME OF OWNER OF CABLE SYSTEM: VERNEAU NETWORKS, INC.					63393		Name
SUBSTITUTE CARRIAGE: In General: In space i, identify system carried on a substitute if tions, or authorizations. For a f the general instructions.	, every noi basis durin	nnetwork televi a the accounting	<i>ision program</i> , broadca ng period, under specifi	st by a <i>di</i> s c present a	nd former FCC ru	ies, regula-	Substitute Carriage: Special
<ol> <li>SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE</li> <li>During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?</li> <li>Yes</li> <li>No</li> <li>Note: If your answer is "No," leave the rest of this page blank. If your answer is "Yes," you must complete the program log in block 2.</li> </ol>							
2. LOG OF SUBSTITUTE PRO In General: List each substitut clear. If you need more space, Column 1: Give the title of e period, was broadcast by a dist under certain FCC rules, regula Do not use general categories "NBA Basketball: 76ers vs. Bul Column 2: If the program w Column 3: Give the call sign Column 4: Give the broadca the case of Mexican or Canadi Column 5: Give the month a first. Example: for May 7, give Column 6: State the times w to the nearest five minutes. Exa as "6:00-6:30 p.m." Column 7: Enter the letter "I to delete under FCC rules and r was substituted for programm	e program please atta every nonn ant station attions, or a like "movie lis." as broadca of the station an station an station when the sumple: a program of the lis equiations	ech additional) etwork televisi and that your cuthorizations. es" or "baskett ast live, enter "tion broadcast is location (the is, if any, the coen your system betitute program carried lited program win effect during	pages: on program ("substitute cable system substitute See page (v) of the gen ball." List specific progr  Yes.". Otherwise, enter ing the substitute progr community to which the munity with which the carried the substitute is am was carried by your by a system from 6:01:1 as substituted for progr the accounting period;	e program", if for the program instruction instruction is station is program. Uncable systems of p.m. to 6 terming the enter the left instruction is program.	that, during the ogramming of anotions for further in creample, "I Low selicensed by the identified), see numerals, with times 128:30 p.m. should at your system wetter "P" if the lister is the lister "P" if the lister is the lister "P" if the lister is the system we the system we the system we have system when system we have system we have system which system we have system we have system which system we have system which system we have system we have system which system we have system we have system which system which system we have system which system we have syste	accounting ther station of the station of the state of th	
on October 19, 1976.	BSTITUTE	PROGRAM			SUBSTITUTE GE OCCURRED	7. REASON	
1, TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM — TO	PELETION	
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Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: VERNEAU NETWORKS, INC.	63393
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount all amounts (gross receipts) paid to your cable system by subscribers for the system's secon (as identified in space E) during the accounting period. For a further explanation of how to page (vi) of the general instructions.  • Gross receipts from subscribers for secondary transmission service(s) during the accounting period.  IMPORTANT: You must complete a statement in space P concerning gross receipts.	ndary transmission service compute this amount, see
Copyright Royalty Fee	COPYRIGHT ROYALTY AND FILING FEES Instructors: 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 but less that Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less that See page (vi) of the general instructions for more information.	an or equal to \$263,800 an \$527,600
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must accounting period is \$52.00  Line 1. Royalty fee for accounting period	\$ 52.00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	
	Line 3. Filing Fee	\$ 15.00
	Line 4. TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add lines 1, 2 and 3	\$ 67.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137.1	
	1. Base amount under statutory formula \$263.86	
	2. Enter amount of gross receipts from space K	nomber
	3. Subtract line 2 from line 1,\$	IO NAME
	4. Enter the amount of gross receipts from space K	
	5. Enter the amount from line 3	
	6. Subtract line 5 from line 4	
	7. Multiplý line 6 by .005 (enter figure here)	
	8. Interest charge. Enter the amount from line 4, space Q, page 8	
		A AA AA
	9. Filing Fee	
:	10. TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD.  Add lines 7, 8 and 9	<b>\$</b>
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527)	,600)
	Enter the amount of gross receipts from space K	
	2. Base amount under statutory formula	<u>00</u>
	3. Subtract line 2 from line 1	_
	4. Multiply line 3 by .01	
		\$ 1,319
	6. Interest Charge. Enter the amount from line 4, space Q, page 8	
	7. Filing Fee	\$ 20.00
	8. TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, 6 and 7	\$
	IMPORTANT: Your remittance must be in the form of an electronic payment payable to Register of t general instructions for more information.	

LEGAL NAME OF OWNER OF CABLE SYSTEM:		<b>A.</b>
VERNEAU NETWORKS, INC.	63393	Name
CHANNELS Instructions: You must give (1) the number of channels on which the cable system its subscribers, and (2) the cable system's total number of activated channels.  1. Enter the total number of channels on which the cable system carried television broadcast stations.  2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services.	els during the accounting period.	Channels
INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS (Identify an individual we can contact about this statement of account.)	NEEDED	N
Name DONALD J HAMMER	Telephone 608-489-3230	Individual to Be Contacted
Address 121 MILL ST PO BOX 427 (Number, street, rural route, apartment, or suite number)		for Further Information
HILLSBORO, WI 54634-0427		
Email (optional) DJHAMMER@HILLSBOROTEL.COM Fax (option	al) 608-489-1111	
CERTIFICATION (This statement of account must be certified and signed in tions, as explained in the general instructions.).	accordance with Copyright Office regula-	0
I, the undersigned, hereby certify that (Check one, but only one, of the bo	xes.)	Certification
(Owner other than corporation or partnership) I am the owner of the caspace B; or	able system as identified in line 1 of	
(Agent of owner other than corporation or partnership) I am the duly a cable system as identified in line 1 of space B, and that the owner is not a	uthorized agent of the owner of the accorporation or partnership; or	
(Officer or partner) I am an officer (if a corporation) or a partner (if a partner owner of the cable system in line 1 of space B.	nership) of the legal entity identified as	
<ul> <li>I have examined the statement of account and hereby declare under pena- tained herein are true, complete, and correct to the best of my knowledge good faith. [See 18 U.S.C. sec.1001]</li> </ul>	ulty of law that all statements of fact con- , information, and belief, and are made in	
Handwritten signature: 2	12/	
Typed or printed name: DONALD J HAMN	IER	
Title: PRESIDENT (Title of official position ha	eld.in corporation or partnership)	
Date: 8/28/2019		

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (Pil) requested on this form in order to process your statement of account. Pil is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing Pil, 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 Pil requested is that it may delay processing of your statement of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: VERNEAU NETWORKS, INC.	63393
Special Statement Concerning Gross Receipts Exclusions	SPECIAL STATEMENT CONCERNING GROSS REC The Satellite Home Viewer Act of 1988 amended Title 17, so lowing sentence:  "In determining the total number of subscribers and the service of providing secondary transmissions of primary b scribers and amounts collected from subscribers receiving For more information on when to exclude these amounts, so During the accounting period, did the cable system exclude a made by satellite carriers to satellite dish owners?	ection 111(d)(1)(A) of the Copyright Act by adding the fol- gross amounts paid to the cable system for the basic roadcast transmitters, the system shall not include sub- ng secondary transmissions pursuant to section 119." ee the note on page (vi) of the general instructions. any amounts of gross receipts for secondary transmissions.
	YES. Enter the total here and list the satellite carrier(s) b	elow\$
	Name Mailing address	
Q Interest Assessment	INTEREST ASSESSMENT  You must complete this worksheet for those royalty payment For an explanation of interest assessment, see page (vii) of Line 1. Enter the amount of late payment or underpayment.	the general instructions.
	Line 2. Multiply line 1 by the interest rate* and enter the sun	x%
	Line 3. Multiply line 2 by the number of days late and enter	x
	Line 4, Multiply line 3 by .00274** and enter here and in spa fine 2, or block 2, line 8, or block 3, line 6	ce L (page 6) block 1, (interest charge)
	* To view the interest rate chart click on www.copyright.go contact the Licensing Division at (202) 707-8150 or licens	
	**This is the decimal equivalent of 1/365, which is the inter	rest assessment for one day late.
	Note: If you are filing this worksheet covering a statement of list below the owner, address, first community served, ID nu	account already submitted to the Copyright Office, please mber, and accounting period as given in the original filing.
	Owner	
	ID number First community served	
	Accounting period	4

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.