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

STATEM	ENT OF ACCOUNT	FOR COPYRIGHT	FOFFICE USE ONLY	Return completed workbook by email to:
	ary Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@loc.gov
General instru	ems (Short Form) uctions are located o of this workbook	02/22/2021	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (YY)	(Y/(Period))	
	2020/2	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 th of the subsidiary, not that of the parent co		ary of another corporation, give the full corpo	rate title
Owner	List any other name or names under which	h the owner conducts the business of the	cable system.	
	If there were different owners during the single statement of account and royalty fe	<u> </u>	e last day of the accounting period should sub g period.	mit a
	Check here if this is the system's first filing	g. If not, enter the system's ID number as	signed by the Licensing Division.	63756

Blue Hill, NE 68930

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.

2	(Number, street, rural route, apartment, or suite number)
	(City, town, state, zip code)
cess your ing PII, yo ared for t	111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone ou 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 he 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 nts of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.
	e: Section cess your ing PII, yo ared for t

LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM

BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)

MAILING ADDRESS OF OWNER OF CABLE SYSTEM

Number, street, rural route, apartment, or suite number)

IDENTIFICATION OF CABLE SYSTEM:

MAILING ADDRESS OF CABLE SYSTEM

Glenwood Telecommunications, Inc.

PO Box 357

С

System

1

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Name	Glenwood Telecommunications, Inc.	63756
	Instructions: List each separate community served by the cable system. A "community	
Р	"a separate and distinct community or municipal entity (including unincorporated con	
D	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list	
	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 ho	ome parks should be reported in parentheses below the
Area	identified city.	
Served	····,	
		AT1-7
-	CITY OR TOWN	STATE
First	Hebron	NE
Community		
ows as Necessary		

								FORM SA1	TEM I
Name	LEGAL NAME OF OWNER OF C							515	6375
	Glenwood Telecommur	nications, In	С.						0070
-	SECONDARY TRANSMISSION	SERVICE: SU	IBSCRI	BERS AND R	ATES				
E	In General: The information in s	•		0					
Secondary	system, that is, the retransmission about other services (including particular services)								
Transmission	last day of the accounting period								
Service: Sub-	Number of Subscribers: Bot	h blocks in spac	ce E cal	for the numb	er of subso	ribers to the cal			
scribers and	down by categories of secondar								
Rates	each category by counting the n separately for the particular service	•		0,0				s charged	
	Rate: Give the standard rate of							ge and the	
	unit in which it is generally billed	-	-	•				-	
	category, but do not include disc	counts allowed	for adva	nce payment.					
	Block 1: In the left-hand block	•		Ũ		•			
	systems most commonly provide that applies to your system. Not								
	categories, that person or entity			-		-			
	subscriber who pays extra for ca						•		
	first set" and would be counted of								
	Block 2: If your cable system	-		•					
	printed in block 1 (for example, t					,	<i>,,</i>	, 0	
	with the number of subscribers a sufficient.	and rates, in the	e right-h	and block. A t	vo- or thre	e-word descript	on of the	service is	
		OCK 1					BLOCK	< 2	
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE	RS	RATE	САТИ	EGORY OF SEF		NO. OF SUBSCRIBERS	RA
	Residential:	OUDOCIVIDE	_110		0ATT			GOBGORIBEIRG	
	Service to first set				Stream	ing Essentia	1	-	23.
	Service to additional set(s)		0	4.50		ing Preferre		-	95.
	• FM radio (if separate rate)		Ŭ	-1100		ing Premier		-	###
	Motel, hotel					ing Ultimate			###
	Commercial				Cinema				12.
	Converter					me/TMC			18.
	Residential				Starz/E				15.
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s				
F	In General: Space F calls for ra		,		•	• •			
Г	not covered in space E, that is, t					,	,		
Services	service for a single fee. There and furnished at cost or (2) services	•			0		0 (,	
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the			,, -				- 3,	
ransmissions:	Block 1: Give the standard rate	• •				••			
	Block 2: List any services that								
Rates	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.								
Rates		1 0	brief (two- or three-word) description and include the rate for each.						
Rates		ption and includ		te for each.					
Rates	brief (two- or three-word) descrip	ption and includ BLOC	CK 1			D.475	0.175.0	BLOCK 2	
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE	ption and includ BLOC RATE	CK 1 CATEG	ORY OF SER		RATE	CATEG	BLOCK 2 DRY OF SERVICE	RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services:	ption and includ BLOC RATE	CK 1 CATEG Installa	ORY OF SER tion: Non-res		RATE	CATEG		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot	ORY OF SER tion: Non-res		RATE	CATEG		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot • Con	ORY OF SER tion: Non-res el, hotel ımercial		RATE	CATEG		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot • Con • Pay	ORY OF SER tion: Non-res el, hotel nmercial cable	idential	RATE	CATEG		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot • Con • Pay • Pay	ORY OF SER tion: Non-res el, hotel mercial cable cable	idential	RATE	CATEG		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire	ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l cl protection	idential	RATE	CATEG		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	ORY OF SER tion: Non-res el, hotel mercial cable cable-add'l ch protection glar protection	idential	RATE	CATEG		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	ORY OF SER tion: Non-res el, hotel mmercial cable cable-add'l ch protection glar protection ervices:	idential	RATE	CATEGO		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE 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)	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg Other s • Rec	ORY OF SER tion: Non-res el, hotel mmercial cable cable-add'l ch protection glar protection ervices: onnect	idential	RATE	CATEGO		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg Other s • Rec • Disc	ORY OF SER tion: Non-res el, hotel mmercial cable-add'l ch protection glar protection ervices: onnect connect	idential	RATE	CATEGO		RAT
Rates	brief (two- or three-word) descrip CATEGORY OF SERVICE 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)	ption and includ BLOC RATE	CK 1 CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg Other s • Rec • Disc • Outl	ORY OF SER tion: Non-res el, hotel mmercial cable cable-add'l ch protection glar protection ervices: onnect	idential annel	RATE	CATEGO		RA

ccounting Period: 2	2020/2			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID#
Humo	Glenwood Telecomm	unications, Inc.		63756
G Primary Transmitters: Television	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, as Substitute Basis Stations: basis under specific FCC ru • Do <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a basis. For further informatio Column 1: List each station multicast stream associated "WETA-2" as the same on the Column 2: Give the channel of license. For example, WI Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these te Column 4: Give the location	ntify every television station (including in during the accounting period, <i>excep</i> in effect on June 24, 1981, permitting t)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. With respect to any distant stations c les, regulations, or authorizations: in space G—but do list it in space I (t a substitute basis. Ilso in space I, if the station was carrie in concerning substitute basis stations, 's call sign. <i>Do not</i> report origination with a station according to its over-the	<i>t</i> (1) stations carried only on a part-tir he carriage of certain network program 51(e)(2) and (4))]; and (2) certain stati arried by your cable system on a sub- he Special Statement and Program Li- d both on a substitute basis and also , see page (v) of the general instruction program services such as HBO, ESPI e-air designation. For example, repor- evision station for broadcasting over the station, an independent station, or a li- (for network multicast), "I" (for indepen- or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station is	ne basis under ms [sections ons carried on a stitute program og)—if the on some other ons. N, etc. Identify each t multistream he air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KSNB	11.2	N	Hastings, NE
	KGIN	11.1	N	Grand Island, NE
Rows as Necessary	KHNE-NET1	29.1	E	Hastings, NE
	KHNE2-Network	29.2	E-M	Hastings, NE
	KFXL	15.1	Ν	Lincoln, NE
	KLKN	8.1	Ν	Lincoln, NE
	GRIT	8.2	I-M	Lincoln, NE
	Escape	8.3	I-M	Lincoln. NE
	МеМу	11.3	I-M	Grand Island, NE
	H&I	11.4	I-M	Grand Island, NE
	Circle	11.5	I-M	Grand Island, NE

Glenwood T	elecommu							SYSTEM I 637
	every radio s	station ca	arried on a separate and discronnerally receivable by your cab					Н
eceivable if (1) on the basis of a For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf isignal, indicate Column 4: G	it is carried by monitoring, to prmation about m. lentify the call tate whether to the radio stat this by placing ive the station	y the sys be recei at the Co I sign of e the static ion's sign g a chech n's locatio	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante this point, see par the sed by the cable s ne station is licens	adend, and (2 enna, during c ge (v) of the g ystem as a se sed by the FC	?) it can ertain st eneral in eparate :	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	, AM or FM	S/D	LOCATION OF STATION	
CALL SIGN		5/0	LOCATION OF STATION	CALL SIGN		5/0	LOCATION OF STATION	
				 		·		

Accounting Perio							FORM	M SA1-2E. PAGE 5.
Nama	LEGAL NAME OF OWNER OF							SYSTEM ID#
Name	Glenwood Telecommu	unications	s, Inc.					63756
	SUBSTITUTE CARRIAG				G			
I I	In General: In space I, ident				-	tion that you	ur ophlo ovo	tom carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE				
Special	 During the accounting per 	riod, did you	ur cable syster	n carry, on a substitute ba	isis, any noni	network telev	vision prog	ram
Statement and Program Log	broadcast by a distant sta	-			-		YES	× NO
r rogram Log	-				<i>"</i> ```		-	
	Note: If your answer is "No	o", leave the	e rest of this pa	ige blank. If your answer is	s "Yes," you i	must comple	ete the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI			ata lina. Lisa abbraviation	s whorever p	occiblo if th	oir moonin	n ie
	In General: List each subs clear. If you need more spa				s wherever p		en meaning	y is
				vision program ("substitute	e program") t	hat, during t	he account	ing
	period, was broadcast by a	distant sta	tion and that y	our cable system substitut	ted for the pro	ogramming	of another s	station
	under certain FCC rules, re							
	Do not use general categor "NBA Basketball: 76ers vs.		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I L	love Lucy"	or
			dcast live ent	er "Yes." Otherwise enter	"No "			
				asting the substitute prog				
				the community to which th			ne FCC or,	in
	the case of Mexican or Car							
	first. Example: for May 7 gi		when your sy	stem carried the substitute	e program. U	se numerals	, with the n	nonth
			e substitute pr	ogram was carried by you	r cable syste	m I ist the ti	mes accura	atelv
	to the nearest five minutes.							atory
	stated as "6:00–6:30 p.m."							
				n was substituted for prog				
	to delete under FCC rules a was substituted for program							ogram
	effect on October 19, 1976		your system w			s anu regula		
								1
						N SUBSTIT		
	S		E PROGRAN			AGE OCCL		7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TI FROM –		
							-	
							-	
							-	
						-	-	
						_	_	
							-	
							_	
						_	_	
					·		-	
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						-	-	
							-	
						-	-	
			[

Accounting Period:	2020/2	FORM S/	A1-2E. PAGE 6.
Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	YSTEM ID#
Name	Glenwood Telecommunications, Inc.		63756
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Ent all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmi (as identified in space E) during the accounting period. For a further explanation of how to compute this a 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. IMPORTANT: You must complete a statement in space P concerning gross receipts.	ssion service mount, see	5,077.40 bss receipts)
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 but less than or equal to \$2 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form formation.	63,800	
	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 pay for t accounting period is \$52.00	his six-mon	
	Line 1. Royalty fee for accounting period	\$	52.00
	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 lines 1 and 2	. \$	52.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	00)	
	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		
	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. 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 \$263,800 (but less than \$527,	600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula \$ 263,800.00		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	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		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form for more informati		hts!

Accounting Period:	2020/2	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Glenwood Telecommunications, Inc.	SYSTEM ID# 63756
M Channels	CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 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 .	11 163
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual to whom we can contact about this statement of account.)	
for Further Information	Name Stanley Rouse Telephone	402-756-3131
	Address 510 West Gage, PO Box 357 (Number, street, rural route, apartment, or suite number) Blue Hill, NE 68930 (City, town, state, zip)	
	Email stanr@glenwoodtelco.net Fax (optional) 402-756-313	34
O Certification	 CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) I, the undersigned, hereby certify that (Check one, <i>but only one</i>, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ow in line 1 of space B. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herei are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	system as identified wner of the cable system
	X /s/ Stanley Rouse Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	
	Typed or printed name: Stanley Rouse Title: CEO/GM (Title of official position held in corporation or partnership)	
	Date: 2/22/2021	

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 fling, a determination that would be made by a court of law.

unting Period: 2020/2	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
nwood Telecommunications, Inc.	6375
 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? YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address 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.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessmer
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
Line 2 Multiply line 1 by the interest rate* and enter the sum here	_
Line 3 Multiply line 2 by the number of days late and enter the sum here	_
Line 3 Multiply line 2 by the number of days late and enter the sum here - x - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$	-
x	
Line 3 Multiply line 2 by the number of days late and enter the sum here - x - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 - (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	-
x	
x	
x	
x	
x	

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 th 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 fling, a determination that would be made by a court of law.