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 COPYRIG	Return completed workbook by email to:					
	ary Transmissions by	DATE RECEIVED	AMOUNT					
General instru	ems (Short Form) uctions are located of this workbook	02/28/2022	\$ ALLOCATION NUMBER	<u>coplicsoa@loc.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150				
Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT: (1	(YYY/(Period))					
	2021/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31					
Accounting Period	202	12 Barcode Data Filing Period (optiona	I - see instructions)					
	la churchtie neu							
В	Instructions: Give the full legal name of the owner of title of the subsidiary, not that of the p		osidiary of another corporation, give the full	corporate				
Owner	List any other name or names under w	hich the owner conducts the business o	f 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 f	iling. If not, enter the system's ID numb	er assigned by the Licensing Division.	62972				
	LEGAL NAME OF OWNER/MAIL	ING ADDRESS OF CABLE SYSTE	M					
	CCI Systems, Inc. (FKA Cable Co	-	Ι Τ.\					
	DUSINESS NAME(S) OF OWNER	OF CABLE SYSTEM (IF DIFFEREN						
	Astrea							
	MAILING ADDRESS OF OWNER	OF CABLE SYSTEM						
	P.O. BOX 190 (Number, street, rural route, apartment, or suit	e number)						
	Iron Mountain, MI 49801 (City, town, state, zip)							
С	INSTRUCTIONS: In line 1, give any bu							
	names already appear in space B. In li		he system, if different from the addre	ess given in space B				
System	1	:						
	MAILING ADDRESS OF CABLE SYST	EM:						
	2 (Number, street, rural route, apartment, or suit							
	 Number, street, rural route, apartment, or suit 	e number)						
	(City, town, state, zip code)							
Privacy Act Notic	ce: Section 111 of title 17 of the United States Code	authorizes the Copyright Offce to collect t	he personally identifying information (PII) reque	ested on this				

Final of Notice: Section 111 of title 17 of the United States Code autonorzes the Copyright Office to collect the personally identifying information (Pil) 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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
Humo	CCI Systems, Inc. (FKA Cable Constructors Inc)	62972
D	Instructions: List each separate community served by the cable system. A "com "a separate and distinct community or municipal entity (including unincorporat discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that as the "first community." Please use it as the first community on all future film	ted communities within unincorporated areas and including single, you list will serve as a form of system identification hereafter known gs.
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mo identified city.	obile home parks should be reported in parentheses below the
	CITY OR TOWN	STATE
First	Cecil	WI
ommunity		
as Necessary		

								FORM SA1	-2E. PAGE	
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:									
	CCI Systems, Inc. (FKA Cable Constructors Inc)									
-	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES									
E	In General: The information in s	•		-		•				
	system, that is, the retransmission									
Secondary	about other services (including p last day of the accounting period						those exist	ing on the		
Transmission Service: Sub-	Number of Subscribers: Both	`		,	,	,	ble system	broken		
scribers and	down by categories of secondar	•					,	,		
Rates	each category by counting the n	umber of billing	gs in that ca	tegory (the i	number c	, of persons or or	ganizations	charged		
	separately for the particular serv									
	Rate: Give the standard rate of	-					-	-		
	unit in which it is generally billed category, but do not include disc				iy stanua		is within a			
	Block 1: In the left-hand block				es of sec	ondary transmis	ssion servi	ce that cable		
	systems most commonly provide							0,		
	that applies to your system. Not			-		-				
	categories, that person or entity subscriber who pays extra for ca						•			
	first set" and would be counted of						Idel Selvi			
	Block 2: If your cable system					service that are	e different f	rom those		
	printed in block 1 (for example, t	iers of service	s that includ	e one or mo	re secon	dary transmissi	ons), list th	em, together		
	with the number of subscribers a	and rates, in th	e right-hand	l block. A tw	o- or thre	e-word descript	tion of the s	service is		
	sufficient.							()		
	BLC	BLOCK 1					BLOCK	NO. OF	1	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATE	EGORY OF SE	RVICE	SUBSCRIBERS	RAT	
	Residential:									
	 Service to first set 		19	50.00	Preferr	referred Choice		76	75.0	
	 Service to additional set(s) 				Premie	r Plus		34	95.	
	 FM radio (if separate rate) 									
	Motel, hotel									
	Commercial									
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC									
F	In General: Space F calls for ra	•			•					
•	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									
Services	8		,		0		0.0	,		
Other Than	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,									
Secondary	enter only the letters "PP" in the rate column.									
ransmissions: Rates	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									
Nates	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.									
		BLO						BLOCK 2		
		RATE		Y OF SERV	ICE	RATE	CATEGO	DRY OF SERVICE	RAT	
	CATEGORY OF SERVICE			n: Non-resid						
	CATEGORY OF SERVICE Continuing Services:	TUTE					Showti	me & TMC		
		18.95	• Motel, I	notel			Showtime & Th Stars & Encore		14.5	
	Continuing Services:						Stars &		14.9 12.9	
	Continuing Services: • Pay cable	18.95	• Motel, I	ercial						
	Continuing Services: • Pay cable • Pay cable—add'l channel	18.95	• Motel, ł • Comme • Pay cal	ercial	annel			Encore Tier	12.9	
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	18.95	• Motel, ł • Comme • Pay cal	ercial ble ble-add'l cha	annel			Encore Tier	12.9	
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	18.95	• Motel, I • Comme • Pay cal • Pay cal • Fire pro	ercial ble ble-add'l cha	annel			Encore Tier	12.9	
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	18.95	• Motel, I • Comme • Pay cal • Pay cal • Fire pro	ercial ble ble-add'l cha btection protection	annel			Encore Tier	12.9	
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set	18.95	• Motel, f • Comme • Pay cal • Pay cal • Fire pro • Burglar	ercial ble ble-add'l cha btection protection ices:	annel			Encore Tier	12.9	
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	18.95	• Motel, I • Comme • Pay cal • Pay cal • Fire pro • Burglar Other serv	ercial ble ble-add'l cha btection protection r ices: nect	annel			Encore Tier	12.9	
	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)	18.95	Motel, I Comme Pay cal Pay cal Fire pro Burglar Other serv Reconr Disconr	ercial ble ble-add'l cha btection protection r ices: nect	annel			Encore Tier	12.9	

nting Period: 2	2021/2			FORM SA1-2E. PAGE 3.				
Name	LEGAL NAME OF OWNER OF			SYSTEM ID# 62972				
		(A Cable Constructors Inc)		62972				
G Primary ansmitters: elevision	PRIMARY TRANSMITTERS: TELEVISION In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph. Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations: • Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried only on a substitute basis. • List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions. 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 multistream "WETA-2" as the same on the form. 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. <							
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	WBAY	8	N	Green Bay, WI				
	WBAY HD	642	Ν	Green Bay, WI				
vs as Necessary	WFRV	5	Ν	Green Bay, WI				
	WFRV HD	640	N	Green Bay, WI				
	WCWF	10	Ν	Green Bay, WI				
	WCWF HD	644	Ν	Green Bay, WI				
	WEUX	11	Ν	Green Bay, WI				
	WEUX HD	646	Ν	Green Bay, WI				

EGAL NAME OF			Constructors Inc)					SYSTEM I 629
	every radio s	tation ca	rried on a separate and discronnerally receivable by your cab					Н
eceivable if (1) n the basis of i or detailed info aper SA1-2 for Column 1: lo Column 2: S Column 3: lf ignal, indicate Column 4: G	it is carried by monitoring, to prmation abourts m. lentify the call tate whether to the radio stat this by placing ive the station	y the sys be recei t the Cc sign of e he static ion's sign g a check h'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 < mark in the "S/D" column. on (the community to which the the community with which the	t the system's hea system's FM ante this point, see pag ed by the cable s ne station is licens	adend, and (2 anna, during ce ge (v) of the ge ystem as a se sed by the FCC) it can l ertain st eneral ir eparate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
0411 01-11						c / -		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	

Accounting Perio	d: 2021/2						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	CCI Systems, Inc. (FK	A Cable (Constructor	s Inc)				62972
	SUBSTITUTE CARRIAG	E: SPECI	AL STATEME	NT AND PROGRAM LC	G			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programn	accounting p	eriod, under sp	pecific present and former F	CC rules, reg	ulations, or	authorizatio	ons. For a further
Carriage:	1. SPECIAL STATEMEN				5			
Special	During the accounting pe	-			sis anv nonr	otwork tol	avision proc	iram
Statement and			ui cable syster	in carry, on a substitute be	1515, any 11011			
Program Log	broadcast by a distant sta	luon?				Ļ	YES	NO
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you r	nust comp	lete the prog	gram
	log in block 2.							
	period, was broadcast by a under certain FCC rules, re Do not use general catego "NBA Basketball: 76ers vs. Column 2: If the prograt Column 3: Give the call Column 4: Give the broot the case of Mexican or Can Column 5: Give the moot first. Example: for May 7 gi Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m."	titute progra ace, please of every no o distant sta egulations, o ries like "mo Bulls." m was broa sign of the adcast stati nadian stati nath and day ve "5/7." es when th . Example: ter "R" if the and regulat	am on a separ add additiona onnetwork tele tion and that y or authorizatio ovies" or "bask dcast live, ent station broadc on's location (ons, if any, the v when your sy e substitute pr a program car e listed program ions in effect c	I rows to the tables. vision program ("substitute our cable system substitute ns. See page (v) of the ge letball." List specific progra- er "Yes." Otherwise enter casting the substitute progra- the community to which the e community with which the stem carried the substitute ogram was carried by you ried by a system from 6:00 n was substituted for prog- luring the accounting period	e program") the ted for the pro- neral instruction am titles, for e "No." ram. e station is lide e station is ide e program. Us r cable system 1:15 p.m. to 6 rramming that bod; enter the l	nat, during ogramming ions for fur example, "I censed by entified). se numeral n. List the :28:30 p.m your syste etter "P" if	the accoun of another ther informa Love Lucy" the FCC or, s, with the r times accur . should be em was <i>requ</i> the listed pr	ting station ation. ' or , in month rately <i>uired</i>
	offect on October 10, 1076	U	, ,	•				
	effect on October 19, 1976			·				
		UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		7. REASON FOR DELETION
	S	UBSTITUT	E PROGRAM	·	CARRI	AGE OCC	URRED	
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		
	S	UBSTITUT 2. LIVE?	E PROGRAM 3. STATION'S	1	5. MONTH	AGE OCC 6. 1		

Accounting Period:	2021/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CCI Systems, Inc. (FKA Cable Constructors Inc)	S	YSTEM ID# 62972
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transm (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.	ission service amount, see	2,093.16 ss receipts)
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 but less than or equal to \$2 • Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information.	263,800	
	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 accounting period is \$52.00	this 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		
	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 informat		nts!

Accounting Period:	2021/2					FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER CCI Systems, Inc. (F		tors Inc)			SYSTEM ID# 62972
M Channels	 to its subscribers, and (1. Enter the total numb system carried televis 2. Enter the total numb on which the cable sy 	(2) the cable system's t er of channels on which sion broadcast stations er of activated channel rstem carried television	otal number of activated cl n the cable	hannels during the a	elevision broadcast stations ccounting period.	4
N Individual to Be Contacted	INDIVIDUAL TO BE C we can contact about th		ER INFORMATION IS NE	EDED (Identify an ir	dividual to whom	
for Further Information		ly Tuttle Kent St.			Telephone	906-776-2662
	(Num) Iror	ber, street, rural route, apart Mountain, MI 49 town, state, zip)				
	Email	kelly.tuttle@cci	sytems.com		Fax (optional) 906-828-328	39
O Certification	 I, the undersigned, her (Owner other (Agent of ow in line 1 of X (Officer or p in line 1 of I have examined the st 	reby certify that (Check or r than corporation or p oner other than corpor- of space B and that the or partner) I am an officer (of space B. eatement of account and correct to the best of my	Anter an electronic signature Enter signature using an "/s	kes.) r of the cable system the duly authorized a r partnership; or er (if a partnership) of alty of law that all state nd belief, and are ma lulaikal re on the line above to s/ signature" (e.g., /s/	o certify this statement.	system as identified vner of the cable system
			CFO fficial position held in corporation	n or partnership)		
		Date:			2/28/22	

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

	Accounting Period: 2	2021/2		FORM SA1-2E. PAGE 8.
SPECIAL STATEMENT COCOCERNING ROOS RECEIPTS EXCLUSION: The Satisfite from: Viewer Act of 1986 arrended Tile 17, section 111(c)(1)(A), of the Copyright Act by adding the following of providing ascendary transmissions pursuant to active system shall not include subcontents and amounts collected from subscribers and anounts collected from subscribers and amounts of primary transmissions pursuant to section 118. ¹ For more information on when to acclude 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 acclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite did owners? Image and the total here and list the satellite carrier(s) below. S Name:	EGAL NAME OF OWN	NER OF CABLE SYSTEM:		SYSTEM ID#
The Statelite Home Vewer Act of 1988 amended Tile 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: IP Statelite Home Vewer Act of 1988 amended Tile 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: The determining the total number of subscribers and the gross amounts paid to the cable system for the basic scheres and amounts collected from subscribers receiving secondary transmissions pursuant to section 119.* Phoetal Statement Concerning Gross receipts for secondary transmissions made by satellite camers to satellite the paper SA1-2 form. Phoetal Statement Concerning Gross receipts for secondary transmissions made by satellite camers to satellite carrie(s) below. S Name Maring Address Name Maring Address Name Maring Address Name Maring Address Name Name	CCI Systems, Inc	c. (FKA Cable Constructors Inc)		62972
Maiing Address	SPECIAL ST The Satellite He lowing sentence "In deter service of scribers For more inform located in the p During the acco made by satellit NO YES. Enter	TATEMENT CONCERNING GROSS RECEIPTS EXCLUSIO ome Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Ca e: mining the total number of subscribers and the gross amounts paid to the of providing secondary transmissions of primary broadcast transmitters, t and amounts collected from subscribers receiving secondary transmission nation on when to exclude these amounts, see the note on page (vii) of the paper SA1-2 form. bunting period, did the cable system exclude any amounts of gross receipt te carriers to satellite dish owners?	opyright Act by adding the fol- e cable system for the basic he system shall not include sub- ons pursuant to section 119." ne general instructions ots for secondary transmissions	Special Statement Concerning Gross
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Complete this worksheet for those royalty payments and enter the sum here				
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Line 3 Multiply line 2 by the number of days late and enter the sum here - x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here - in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6 \$ * 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. * ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	Line 1 Enter th	he amount of late payment or underpayment		Interest Assessment
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