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	IT OFFICE USE ONLY	Return completed workbook 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	04/16/2018	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

A	ACCO	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2017/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
Accounting		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.	62806
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		Douglas Soden BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		Beaver Valley Cable Co	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		36150 Route 187 (Number, street, rural route, apartment, or suite number)	
		Rome, PA 18837 (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 i s 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.

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I

	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAG
Name		
	Douglas Soden	628
D	Instructions: List each separate community served by the cable system. A "commun "a separate and distinct community or municipal entity (including unincorporated co discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you li as the "first community." Please use it as the first community on all future filings.	ommunities within unincorporated areas and including single
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mobile l identified city.	home parks should be reported in parentheses below the
Served		
	CITY OR TOWN	STATE
First	Rome	PA
Community	North Rome Orwell	PA PA
d Rows as Necessary	North Orwell	PA
	Potterville	PA
	Allis Hollow	PA
	LeRaysville	PA
	West Warren	PA
	Warren Center	PA
	Little Meadows	ΡΑ
	Ulster	ΡΑ
	Hornbrook	
		PA
	Sheshequin	PA

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM.						FORM SA1	TEM II
Name	Douglas Soden								628
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmission about other services (including p last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the misseparately for the particular serv Rate: Give the standard rate c unit in which it is generally billed category, but do not include disc Block 1: In the left-hand block systems most commonly provide that applies to your system. Note categories, that person or entity	pace E should on of television ay cable) in sp (June 30 or D blocks in space y transmission umber of billing ice at the rate i harged for eac (Example: "\$2 ounts allowed in space E, the to their subsc e: Where an inc	cover all and radi ace F, n ecember ce E call service. (s in that ndicateo h catego 20/mth"). for advar e form lis ribers. G dividual o	categories of o broadcasts ot here. All the 31, as the ca for the numbe In general, yo category (the l—not the num ry of service. Summarize a nce payment. the the numbe or organization	secondary by your sy a facts you se may be or of subsc u can com number of ber of set include bo ny standar ies of seco or of subsc is receivin	stem to subscri state must be t). ribers to the cal pute the number f persons or org s receiving serv th the amount or d rate variation ondary transmis ribers and rate ng service that	bers. Give those existi- ble system, er of subscr janizations rice). of the charg s within a p sion servic for each lis falls under	information ng on the broken ibers in charged e and the particular rate e that cable ted category different	
	subscriber who pays extra for ca first set" and would be counted or Block 2: If your cable system I printed in block 1 (for example, ti with the number of subscribers a sufficient.	nce again und has rate catego iers of services ind rates, in the	er "Servi ories for that inc	ce to additiona secondary trai lude one or ma	al set(s)." Ismission Dre second	service that are lary transmissio	different fr ons), list the ion of the s	om those em, together ervice is	
	BLC	DCK 1 NO. OF					BLOCK	X 2 NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATI	EGORY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential: • Service to first set		586	\$66	expand	ed basic		282	\$
	 Service to additional set(s) FM radio (if separate rate) 								
	Motel, hotel								
	Commercial Converter								
	Residential		279	\$5					
	Non-residential			~~					
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for rat not covered in space E, that is, t service for a single fee. There ar furnished at cost or (2) services amount of the charge and the un enter only the letters "PP" in the Block 1: Give the standard rat Block 2: List any services that listed in block 1 and for which as brief (two- or three-word) descrip	e (not subscrib hose services t e two exceptio or facilities furm it in which it is rate column. e charged by tt your cable sys separate charg ttion and includ	er) infor that are in ns: you of ished to usually l he cable stem furr e was m le the rat	mation with re not offered in of do not need to nonsubscribe billed. If any ra system for ea hished or offer ade or establi	spect to al combinatio give rate i rs. Rate in tes are ch ch of the a ed during t	n with any secconformation con- formation shoul arged on a vari- applicable servion he accounting p	ondary trans cerning (1) ld include b able per-proces listed. ces listed.	smission services ooth the ogram basis, were not form of a	
		BLO RATE				RATE		BLOCK 2 DRY OF SERVICE	RAT
	CATEGORY OF SERVICE Continuing Services:	RAIE		ORY OF SER tion: Non-res		RAIE	CATEGO	UNT OF SERVICE	RA
	• Pay cable	\$17		el, hotel			digital	phone	\$
	 Pay cable—add'l channel 			nmercial				t 3mbps	\$
	 Fire protection 		,	cable				t 6 mbps	9
	•Burglar protection		,	cable-add'l ch	annel			t 10 mbps	\$
	Installation: Residential • First set	\$50		protection glar protection				t 20 mbps t 50 mbps	\$69 \$99
	Additional set(s)	ຸລວບ \$50		ervices:			interne	1 JO 111043	499
	• FM radio (if separate rate)	ΨŪŪ		onnect		\$30			
		\$50	• Disc						
	Converter	4 30	Dioc	onnect					
	• Converter	\$ 30		et relocation		\$50			

				0.407514.15
ne	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM ID 6280
	Douglas Soden PRIMARY TRANSMITTERS:			
ary hitters: ision	carried by your cable syster FCC rules and regulations i 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 statior multicast stream associated "WETA-2" as the same on t Column 2: Give the channe of license. For example, W Column 3: Indicate in each educational station, by ente (for independent multicast), For the meaning of these te Column 4: Give the location	also in space I, if the station was carrie on concerning substitute basis stations, n's call sign. <i>Do not</i> report origination p d with a station according to its over-the	t (1) stations carried only on a part-ti he carriage of certain network progra 51(e)(2) and (4))]; and (2) certain stat arried by your cable system on a sub he Special Statement and Program L d both on a substitute basis and also , see page (v) of the general instruction program services such as HBO, ESP e-air designation. For example, repo- evision station for broadcasting over t station, an independent station, or a (for network multicast), "I" (for independent actions in the paper SA1-2 form. t the community to which the station i	me basis under ms [sections ions carried on a stitute program .og)—if the o on some other ons. N, etc. Identify each rt multistream the air in its community noncommercial endent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WNEP	16	N	Moosic, PA
	WNEP2	16.2	Ν	Moosic, PA
		•••••••••••••••••••••••••••••••••••••••		
	WSWB	38	<u> </u>	Plains, PA
sary	WSWB WQMY	38 53	<u> </u>	Plains, PA Wilkes-Barre, PA
sary			 	
sary	WQMY	53	 E	Wilkes-Barre, PA
ssary	WQMY WOLF	53 56	 E 	Wilkes-Barre, PA Wilkes-Barre, PA
essary	WQMY WOLF WVIA	53 56 44		Wilkes-Barre, PA Wilkes-Barre, PA Pittston, PA
essary	WQMY WOLF WVIA WBRE	53 56 44 28		Wilkes-Barre, PA Wilkes-Barre, PA Pittston, PA Wilkes-Barre, PA
cessary	WQMY WOLF WVIA WBRE WQPX	53 56 44 28 64	N I	Wilkes-Barre, PA Wilkes-Barre, PA Pittston, PA Wilkes-Barre, PA Scranton, PA
cessary	WQMY WOLF WVIA WBRE WQPX WETM	53 56 44 28 64 18	N I N	Wilkes-Barre, PA Wilkes-Barre, PA Pittston, PA Wilkes-Barre, PA Scranton, PA Elmira, NY
essary	WQMY WOLF WVIA WBRE WQPX WETM WBNG	53 56 44 28 64 18 12	N I N N	Wilkes-Barre, PAWilkes-Barre, PAPittston, PAWilkes-Barre, PAScranton, PAElmira, NYBinghamton, NY
cessary	WQMY WOLF WVIA WBRE WQPX WETM WBNG WSKG	53 56 44 28 64 18 12 46	N I N N E	Wilkes-Barre, PAWilkes-Barre, PAPittston, PAWilkes-Barre, PAScranton, PAElmira, NYBinghamton, NY
ecessary	WQMY WOLF WVIA WBRE WQPX WETM WBNG WSKG	53 56 44 28 64 18 12 46	N I N N E	Wilkes-Barre, PAWilkes-Barre, PAPittston, PAWilkes-Barre, PAScranton, PAElmira, NYBinghamton, NY
ecessary	WQMY WOLF WVIA WBRE WQPX WETM WBNG WSKG	53 56 44 28 64 18 12 46	N I N N E	Wilkes-Barre, PAWilkes-Barre, PAPittston, PAWilkes-Barre, PAScranton, PAElmira, NYBinghamton, NY
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ecessary	WQMY WOLF WVIA WBRE WQPX WETM WBNG WSKG	53 56 44 28 64 18 12 46	N I N N E	Wilkes-Barre, PAWilkes-Barre, PAPittston, PAWilkes-Barre, PAScranton, PAElmira, NYBinghamton, NY
Necessary	WQMY WOLF WVIA WBRE WQPX WETM WBNG WSKG	53 56 44 28 64 18 12 46	N I N N E	Wilkes-Barre, PAWilkes-Barre, PAPittston, PAWilkes-Barre, PAScranton, PAElmira, NYBinghamton, NY
Necessary	WQMY WOLF WVIA WBRE WQPX WETM WBNG WSKG	53 56 44 28 64 18 12 46	N I N N E	Wilkes-Barre, PAWilkes-Barre, PAPittston, PAWilkes-Barre, PAScranton, PAElmira, NYBinghamton, NY

LEGAL NAME OF		CABLE SY	/STEM:					SYSTEM I
Douglas Soo	den							628
	t every radio s	station ca	arried on a separate and discronerally receivable by your cab					н
Special Instruc	ctions Conce	rning Al	I-Band FM Carriage: Under (Copyright Office r	regulations, ar	n FM sig	nal is generally	Primary
n the basis of for detailed info aper SA1-2 for Column 1: lo	monitoring, to ormation abou rm. dentify the call	be receint the Co	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.	system's FM ante	enna, during c	ertain st	ated intervals.	Transmitters Radio
ignal, indicate Column 4: G	this by placing Give the station	g a checl n's locati	nal was electronically process k mark in the "S/D" column. on (the community to which th the community with which the	ne station is licen	sed by the FC			
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	L							

Accounting Perio	od: 2017/2						FOR	M SA1-2E. PAGE 5.
News	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	Douglas Soden							62806
	SUBSTITUTE CARRIAG				G			
	In General: In space I, ident					ion that you	ır cahle syste	em carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN		RNING SUBST	TITUTE CARRIAGE				
Special Statement and	During the accounting per	iod, did you	ir cable system	carry, on a substitute basi	is, any nonne	twork televi	sion prograr	
Program Log	broadcast by a distant sta	tion?					YES	× NO
	Note: If your answer is "No	". leave the	rest of this pac	e blank. If vour answer is '	"Yes." vou mu	ust complete	e the progra	m
	log in block 2.	,		, ,	, , , ,		p 3	
	2. LOG OF SUBSTITUTE		MS					
	In General: List each subst	titute progra	im on a separa		wherever pos	sible, if the	ir meaning is	5
	clear. If you need more spa				program") the	t during th		
	period, was broadcast by a			sion program ("substitute ur cable system substitute				
	under certain FCC rules, re	gulations, o	r authorization	s. See page (v) of the gene	eral instruction	ns for furthe	er informatio	
	Do not use general categor		vies" or "baske	tball." List specific progran	n titles, for exa	ample, "I Lo	ove Lucy" or	
	"NBA Basketball: 76ers vs.		dcast live ente	r "Yes." Otherwise enter "N	lo "			
	Column 3: Give the call	sign of the	station broadca	sting the substitute progra	ım.			
				e community to which the			e FCC or, in	
	the case of Mexican or Can Column 5: Give the mor			tem carried the substitute			with the mo	hth
	first. Example: for May 7 giv		When you eye			namoralo,		
				gram was carried by your				ly
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	a program carri	ed by a system from 6:01:	15 p.m. to 6:2	8:30 p.m. s	hould be	
		er "R" if the	listed program	was substituted for progra	amming that y	our system	was require	ed
	to delete under FCC rules a							am
	was substituted for program effect on October 19, 1976.		our system wa	s permitted to delete unde	r FCC rules a	ind regulation	ons in	
					11			1
						N SUBST		
	S	1	TE PROGRAM			AGE OCC		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	FROM	— TO	_
	-						-	
					-			
							<u> </u>	
							_	
							_	
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								n
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					· · · · · · · · · · · · · · · · · · ·			

Accounting Period:	2017/2		FORM SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Douglas Soden		SYSTEM ID# 62806
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and all amounts (gross receipts) paid to your cable system by subscribers for the sys (as identified in space E) during the accounting period. For a further explanation 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	stem's secondary trans of how to compute thi	Enter the total of
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 bu • Use block 3 if the amount of gross receipts in space K is more than \$263,800 bu See page (vi) of the general instructions located in the paper SA1-2 form for more info	it less than \$527,600	\$263,800
	BLOCK 1: GROSS RECEIPTS OF \$137,10	00 OR LESS	
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fe 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		
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines	1 and 2	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS	(but more 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		_
	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		
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and	d 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,80	00 (but less than \$52)	7,600)
	1. Enter the amount of gross receipts from space K	334,826.00	
	2. Base amount under statutory formula	263,800.00	
	3. Subtract line 2 from line 1	71,026.00	
	4. Multiply line 3 by .01	·····. \$	710.26
	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	\$ 2,029.26
	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)	\$	2,029.26
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		\$ 2,049.26
	Important: Your remittance must be in the form of an electronic paymen See page i of the general instructions in the paper SA1-2 for		

Accounting Period:	2017/2			FORM SA1-2E. PAGE 7
Name	LEGAL NAME O Douglas Soc	F OWNER OF CABLE SYSTEM: I en		SYSTEM ID# 62806
M Channels	 to its subscrib 1. Enter the to system carri 2. Enter the to on which the 	ers, and (2) the cable system's tota tal number of channels on which the ed television broadcast stations tal number of activated channels cable system carried television bro		ions1272
N Individual to Be Contacted		TO BE CONTACTED IF FURTHEN t about this statement of account.)	R INFORMATION IS NEEDED (Identify an individual to whom)	
for Further Information	Name	Nancy Soden	Telep	hone 570-247-2512
	Address	36159 Route 187 (Number, street, rural route, apartme Rome, PA 18837 (City, town, state, zip)	nt, or suite number)	
	Email	bvc@cableracer.c	com Fax (optional) 570-24	17-2494
O Certification	I, the undersigned of the u	ned, hereby certify that (Check one, ner other than corporation or part ent of owner other than corporatio in line 1 of space B and that the own ficer or partner) I am an officer (if a in line 1 of space B. ed the statement of account and her	t be certified and signed in accordance with Copyright Office regulat , <i>but only one</i> , of the boxes.) thership) I am the owner of the cable system as identified in line 1 of sp on or partnership) I am the duly authorized agent of the owner of the ca her is not a corporation or partnership; or corporation) or a partner (if a partnership) of the legal entity identified a reby declare under penalty of law that all statements of fact contained he iowledge, information, and belief, and are made in good faith.	ace B; or able system as identified s owner of the cable system
		E Typed or printed n Title:	X /s/ Douglas Soden inter an electronic signature on the line above to certify this statement. inter signature using an "/s/ signature" (e.g., /s/ John Smith) mame: Douglas Soden bresident cial position held in corporation or partnership)	
		Date:	02/08/2018	

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

unting Period: 2017/2	FORM SA1-2E. PAG
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
iglas Soden	628
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	- Special Statemen Concerning Gros Receipts Exclusio
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Name Mailing Address Mailing Address	
INTEREST ASSESSMENT	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	0
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. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	
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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.