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 COPYRIG	HT 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	7/16/2018	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

A	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))	
		2018/1 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional - see instructions)	
Accounting Period			
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.	
Owner		List any other name or names under which the owner conducts the business of the cable system.	
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.	
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.	
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM	
		Central Telcom Services LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	_
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		P.O. Box 7 (Number, street, rural route, apartment, or suite number)	
		Fairview, Ut 84629-0007 (City, town, state, zp)	
С		CUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.	
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)	
·			

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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Central Telcom Services LLC	SYSTEM ID# 8733
D Area Served	Instructions: List each separate community served by the cable system. A "comm "a separate and distinct community or municipal entity (including unincorporated discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that yo 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 mobi identified city.	unity" is the same as a "community unit" as defined in FCC rules: communities within unincorporated areas and including single, u list will serve as a form of system identification hereafter known
		07177
First Community	CITY OR TOWN Centerfield Gunnison Axtell	STATE Utah Utah Utah Utah
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:						FORM SA1	
Name	Central Telcom Services								873
Е	SECONDARY TRANSMISSION			-	-				
	In General: The information in sp system, that is, the retransmission								
Secondary	about other services (including p								
Transmission	last day of the accounting period								
Service: Sub-	Number of Subscribers: Both								
scribers and	down by categories of secondary								
Rates	each category by counting the nu separately for the particular service							charged	
	Rate: Give the standard rate cl							e and the	
	unit in which it is generally billed.	(Example: "\$2	0/mth")	. Summarize a					
	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								
	subscriber who pays extra for ca								
	first set" and would be counted o								
	Block 2: If your cable system h	-		•					
	printed in block 1 (for example, ti with the number of subscribers a								
	sufficient.								
	BLC	DCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIBE	ERS	RATE	CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:								
	Service to first set		170	24.95	Expand	ded		142	47.0
	 Service to additional set(s) 								
	 FM radio (if separate rate) 								
	Motel, hotel		21	24.95					
	Commercial								
	Converter		47	-					
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMIS	SIONS: RATE	s				
F	In General: Space F calls for rat	•	'		•	, ,			
F	not covered in space E, that is, the								
Services	service for a single fee. There are furnished at cost or (2) services of		,		0		0.,		
Other Than	amount of the charge and the un								
Secondary	enter only the letters "PP" in the	rate column.	-	-		-		- 9,	
ransmissions:	Block 1: Give the standard rat								
Rates	Block 2: List any services that listed in block 1 and for which a s								
	brief (two- or three-word) descrip				sneu. List	linese oliner serv		IOIIII OI a	
		BLOO						BLOCK 2	
	CATEGORY OF SERVICE			ORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services:			tion: Non-res					
	• Pay cable	17.95	• Mot	el, hotel		Varies			
	Pay cable—add'l channel	15.95	• Cor	nmercial		-			
	Fire protection	-	• Pay	cable		-			
	1 .	-		cable-add'l ch	nannel	-			
	 Burglar protection 					-			
	• •		• רוופ	protection					
	•Burglar protection Installation: Residential • First set	100.00		protection		-			
	Installation: Residential • First set		• Bur	•		-			
	Installation: Residential • First set • Additional set(s)		• Bur Other s	glar protection		- 29.95			
	Installation: Residential • First set		• Bur Other s • Rec	glar protection		- 29.95 -			
	Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)		• Bur Other s • Rec • Dise	glar protection services: connect connect		-			
	Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)		• Bur Other s • Rec • Disc • Out	glar protection services: connect		- 29.95 - 49.95 29.95			

				0/0751/18
Name	LEGAL NAME OF OWNER OF			SYSTEM ID 873
	Central Telcom Servic			
G rimary smitters: levision	In General: In space G, ide 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 not list the station here station was carried only 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 ti Column 2: Give the channe 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>except</i> in effect on June 24, 1981, permitting th)(2) and (4), or 76.63 (referring to 76.6 explained in the next paragraph. With respect to any distant stations ca- les, regulations, or authorizations: in space G—but do list it in space I (the a substitute basis. Ilso in space I, if the station was carrier in concerning substitute basis stations, 's call sign. <i>Do not</i> report origination p 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 orogram 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 indepen- per "E-M" (for noncommercial education uctions in the paper SA1-2 form.	me basis under ms [sections ions carried on a stitute program .og)—if the on some other ons. N, etc. Identify each rt multistream he air in its community noncommercial undent), "I-M" onal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	κυτν	2	N	Salt Lake City, Utah
	ктух	4	N	Salt Lake City, Utah
ecessary	KSL	5	Ν	Salt Lake City, Utah
	KUED	7	E	Salt Lake City, Utah
	KUEN	9	Е	Ogden, Utah
	KSTU	13	Ι	Salt Lake City, Utah
	KJZZ	14	I	Salt Lake City, Utah
	KUPX	16	I	Provo, Utah
	KUCW	30	I	Ogden. Utah
			· · · · · · · · · · · · · · · · · · ·	

EGAL NAME OF			'STEM:					SYSTEM I 87
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cat					н
eceivable if (1) on the basis of or detailed info aper SA1-2 fo Column 1: lo Column 2: S Column 3: If ignal, indicate Column 4: C	it is carried b monitoring, to prmation abour m. dentify the call tate whether f the radio stat this by placing tive the station	y the sys be recein at the Co l sign of o the static cion's sign g a chech n's locati	I-Band FM Carriage: Under of them whenever it is received a ved at the headend, with the opyright Office regulations on 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	It the system's he system's FM ant this point, see pa sed by the cable s ne station is licen	eadend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st eneral i eparate	be expected, rated 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	
		+						

Name Eckl. IME OF OWNER OF CARLE SYSTEM: SYSTEM IDUE 8733 I SUBSTTUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space.1. Centrify every nonsetwork television program. Exoadcast by a clasm station, that your cable system cands on a space provide the accounting previde, under specific prevent and forms FCO dues, regulations, or a statistication in the paper SAL-2 form. SUBSTTUTE CARRIAGE: SPECIAL STATEMENT CANCENENT CARRIAGE Yes: 'you must complete the program 'mage and the induced in the induced i	Accounting Perio						FOI	RM SA1-2E. PAGE 5.
Substitute SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE * During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? 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. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program "substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system carrie to the programming of another station. Do not use general categories like "movies" or "basketball." List specific program. Use numerals. Column 2: Give the title program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the event hand ady when your system carried by system. List the times accurately to the nearest five minutes. Example: a program carried by a system form 6:01:15 p.m. to 6:28:30 p.m. should be stated as 6:00-6:30 p.m."	Nama	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:				SYSTEM ID#
In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE 1. Outing the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program 1. Total actions of the program of the program of the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE 1. Outing the accounting period, did your cable system carried to a substitute basis, any nonnetwork television program 1. Total actions of the program of the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE 1. Outing the accounting period, was tradicated to the program of the program of the program log in block 2. 2. LOG OF SUBSTITUTE PROGRAM 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast like "movies" or "bask Basketball". Theres vs. Bulls: Column 2: Give the station and day our cable system substitute for the programming of another station on not use general categories like "movies" or "bask Basketball". Gers vs. Bulls: Column 3: Give the contantions, if any, the community to which the station is identified). Column 3: Give the month and day when your system carried by	Name	Central Telcom Servic	es LLC					8733
Substitute Carriage: Special Statement and Program Log substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE Program Log • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? 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. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the file of every nonnetwork television program "substitute program" but, during the accounting period, was broadcast by a distant station and that your cable system substitute for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "Love Lucy" or "NBA Basketball." Ger vs. Bulls." Column 3: Give the call sign of the station broadcast gray the your system carried by your cable system. List the times accurately to the case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is licensed by the FCC or, in the case of Mexican or Canadian stations in effect the of every "Pi' the listed program was substituted for prog		SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G		
Carriage: Special Statement and Program Log 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station? YES Wote: 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. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program "substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 3: Give the call sign of the station broadcast line, enter "Yes." Otherwise enter "No." Column 3: Give the all sign of the station broadcast line program was carried the substitute program. Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period	I							
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Statement and Program Log bund the accounting period, duryout votice system carry, on a substitute basis, any nonnetwork relevision program broadcast by a distant station? Image: Type:		1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE			
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log in block 2. 2. LOG OF SUBSTITUTE PROGRAMS In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please add additional rows to the tables. Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substitute for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: The program was broadcast live, enter "Yes." Otherwise enter "No." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community with which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "57." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was <i>required</i> to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed		Note: If your answer is "No	' leave the	rest of this pac	e blank. If your answer is '	"Yes " vou mi	ist complete the progra	
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Column 1: Give the title of every nonnetwork television program ("substitute program") that, during the accounting period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information. Do not use general categories like "movies" or "basketball." List specific program titles, for example, "I Love Lucy" or "NBA Basketball: 76ers vs. Bulls." Column 2: If the program was broadcast live, enter "Yes." Otherwise enter "No." Column 3: Give the call sign of the station broadcasting the substitute program. Column 4: Give the broadcast station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community to which the station is identified). Column 5: Give the month and day when your system carried the substitute program. Use numerals, with the month first. Example: for May 7 give "5/7." Column 6: State the times when the substitute program was carried by your cable system. List the times accurately to the nearest five minutes. Example: a program carried by a system from 6:01:15 p.m. to 6:28:30 p.m. should be stated as "6:00–6:30 p.m." Column 7: Enter the letter "R" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect during the accounting period; enter the letter "P" if the listed program was substituted for programming that your system was required to delete under FCC rules and regulations in effect on October 19, 1976. WHEN SUBSTITUTE CARRIAGE OCCURRED 1. TITLE OF PROGRAM					te line. Use abbreviations	wherever pos	sible, if their meaning i	s
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Accounting Period:	2018/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	S	STEM ID#
	Central Telcom Services LLC		8733
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this 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.	mission servic s amount, see	e 8,823.46
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 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 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-month	
	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,	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		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 Due	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Duc	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		hts!

Accounting Period:	2018/1	FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Central Telcom Services LLC	SYSTEM ID 8733
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 on which the cable system carried television broadcast stations and nonbroadcast services	9 245
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 Paul Peckham Telephone	e <mark>(435) 427-0561</mark>
	Address P.O. Box 7 (Number, street, rural route, apartment, or suite number) Fairview, Utah 84629 (City, town, state, zip)	
	Email p.peckham@centracom.com Fax (optional) (435) 427-3	1200
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 I (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cables in line 1 of space B and that the owner is not a corporation or partnership; or (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 herein 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)] X /s/ Eddie L. Cox 	B; or system as identified ner of the cable system
	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: Eddie L. Cox Title: President & General Manager (Title of official position held in corporation or partnership)	
	Date: 7/12/2018	

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 law

unting Period: 2018/1	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
tral Telcom Services LLC	873
 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? 	P Special Statement Concerning Gross Receipts Exclusion
X NO YES. Enter the total here and list the satellite carrier(s) below. \$	
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
	Q Interest Assessmen
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