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

Return completed workbook

STATEM	ENT OF ACCOUNT	FOR COPYRIGHT OFFICE USE ONLY by email to:						
	ary Transmissions by	DATE RECEIVED	AMOUNT					
-	ems (Short Form)	02/28/2020	\$	<u>coplicsoa@copyright.gov</u> For additional information, contact the U.S. Copyright Office Licensing Division at:				
	of this workbook		ALLOCATION NUMBER	Tel: (202) 707-8150				
A	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))					
	2019/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31					
	20192	Barcode Data Filing Period (optiona	Il - see instructions)					
Accounting Period								
В	Instructions: Give the full legal name of the owner of t of the subsidiary, not that of the parent c		idiary of another corporation, give the full co	rporate title				
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 filin	g. If not, enter the system's ID number	assigned by the Licensing Division.	062601				
	LEGAL NAME OF OWNER/MAILIN	G ADDRESS OF CABLE SYSTEM						
	CEQUEL COMMUNICATIONS LLC							
	BUSINESS NAME(S) OF OWNER OF	F CABLE SYSTEM (IF DIFFERENT)					
	SUDDENLINK COMMUNICATIONS	•	,					
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM						
	3015 S SE LOOP 323							
	(Number, street, rural route, apartment, or suite i	number)						
	(City, town, state, zip)							
С	INSTRUCTIONS: In line 1, give any busin names already appear in space B. In line		, ,	5				
System	1 IDENTIFICATION OF CABLE SYSTEM: GREENE STATE CORREC	TIONAL INSTITUTION						
	MAILING ADDRESS OF CABLE SYSTEM							
	2 (Number, street, rural route, apartment, or suite	number)						
	(City, town, state, zip code)							
Brivacy Act Noti	co: Section 111 of title 17 of the United States Code a	utherizes the Convright Offee to collect t	he personally identifying information (PII) requi	acted on this				

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 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:						
Name	CEQUEL COMMUNICATIONS LLC	06260						
D	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rule: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter know as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the							
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, or mob identified city.	ile home parks should be reported in parentheses below the						
First	CITY OR TOWN WAYNESBURG	<u>STATE</u> PA						
Community	(GREENE SCI)							
	๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛๛							
d Rows as Necessary								

									1-2E. PAGE		
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					SYS			
	CEQUEL COMMUNICAT			06260							
	SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES										
E	In General: The information in s										
Secondary	system, that is, the retransmission about other services (including particular services)										
Transmission	last day of the accounting period	, , ,	,		,			ang on the			
Service: Sub-	, , , , , , , , , , , , , , , , , , , ,	`		,	,	,	ble system	ı, broken			
scribers and	Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in										
Rates	each category by counting the n			0,1				charged			
	separately for the particular server Rate: Give the standard rate of							ne and the			
	unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.										
	Block 1: In the left-hand block	•		-		•					
	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	once again und	ler "Serv	rice to addition	al set(s)."						
	Block 2: If your cable system	•									
	printed in block 1 (for example, t										
	with the number of subscribers a sufficient.	and rates, in the	e rignt-n	and DIOCK. A th	vo- or thre	e-wora descript	ion of the s	service is			
		OCK 1					BLOCK	٢2			
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SEF	NO. OF ERVICE SUBSCRIBERS				
	Residential:										
	Service to first set		0	-							
	Service to additional set(s)		0	0							
	• FM radio (if separate rate)										
	Motel, hotel										
	Commercial		301	42.53							
	Converter										
	Residential										
	Non-residential										
									1		
	SERVICES OTHER THAN SEC										
F	In General: Space F calls for ra not covered in space E, that is, t	•	,		•	• •					
•	service for a single fee. There a										
Services	furnished at cost or (2) services										
Other Than	amount of the charge and the ur		usually	billed. If any ra	ites are cl	narged on a vari	able per-p	rogram basis,			
Secondary Fransmissions:	enter only the letters "PP" in the rate column.										
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										
	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) descrip	ption and inclue	de the ra	ite for each.							
	BLOCK 1							-			
		BLO	JNI					BLOCK 2			
	CATEGORY OF SERVICE	BLO RATE		ORY OF SER	/ICE	RATE	CATEG	BLOCK 2 DRY OF SERVICE	RATE		
	CATEGORY OF SERVICE Continuing Services:	1	CATEG	ORY OF SER tion: Non-res		RATE	CATEGO		RATE		
	Continuing Services: • Pay cable	1	CATEG Installa • Mot	tion: Non-res		RATE	CATEGO		RATE		
	Continuing Services: • Pay cable • Pay cable—add'l channel	1	CATEG Installa • Mot • Con	tion: Non-res el, hotel nmercial		RATE	CATEGO		RATE		
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	1	CATEG Installa • Mot • Con • Pay	tion: Non-res el, hotel nmercial cable	dential	RATE	CATEGO		RATE		
	Continuing Services: • Pay cable • Pay cable—add'l channel	1	CATEG Installa • Mot • Con • Pay	tion: Non-res el, hotel nmercial	dential	RATE	CATEGO				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	1	CATEG Installa • Mot • Con • Pay • Pay	tion: Non-res el, hotel nmercial cable	dential	RATE	CATEGO				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	1	CATEG Installa • Mot • Con • Pay • Pay • Fire	tion: Non-res el, hotel nmercial cable cable-add'l ch	dential	RATE	CATEGO				
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	1	CATEG Installa • Mot • Con • Pay • Pay • Fire • Bure	tion: Non-res el, hotel nmercial cable cable-add'l ch protection	dential	RATE	CATEGO		RATE		
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential • First set	1	CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg	tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection	dential	RATE	CATEGO		RATE		
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	1	CATEG Installa • Mot • Con • Pay • Pay • Fire • Burg Other s • Rec	tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection services:	dential	RATE	CATEGO		RATE		
	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)	1	CATEG Installa • Mot • Con • Pay • Pay • Fire • Bure • Bure • Rec • Disc	tion: Non-res el, hotel nmercial cable cable-add'l ch protection glar protection services: connect	dential	RATE -	CATEGO		RATE		

counting Period: 2	2019/2			FORM SA1-2E. PAGE 3		
Name	LEGAL NAME OF OWNER OF			SYSTEM ID#		
	CEQUEL COMMUNIC			062601		
G Primary Transmitters: Television	 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, <i>except</i> (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 <i>only</i> 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 concening substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. <i>Do not</i> 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 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form. Column 4: Give the location of each station. For U.S. stations, list the c					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION		
	KDKA-1	2	N	PITTSBURGH, PA		
	WPCB-1	40		GREENSBURG, PA		
ows as Necessary	WPCW-1	19		PITTSBURGH, PA		
in as necessary	WPGH-1	53	- I	PITTSBURGH, PA		
	WPXI-1	11	Ν	PITTSBURGH, PA		
	WQED-1	13	E	PITTSBURGH, PA		
	WTAE-1	4	Ν	PITTSBURGH, PA		

EGAL NAME OF								SYSTEM 062
	every radio s	tation ca	arried on a separate and discr nerally 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 ignal, indicate Column 4: G	it is carried by monitoring, to prmation abour m. lentify the call tate whether t the radio stati this by placing vive the station	y the sys be recei t the Cc sign of e he static ion's sign g a check 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 his point, see pa ed by the cable s le 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 general i 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	
		5,0		UNEL OIGH		5,0	Lookholi of Station	
						·		
						·		
							·	

Accounting Perio	od: 2019/2						FORM	VI SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	ATIONS L	LC					062601
	SUBSTITUTE CARRIAG				G			
I I	In General: In space I, ident	-	-			tion that you	r ooblo ovo	tom corried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN				0			
Special	During the accounting per	-			sis anv non	network telev	rision nroa	ram
Statement and		-		frouny, on a substitute be	515, any 11611			
Program Log	broadcast by a distant sta	lion?					YES	× NO
	Note: If your answer is "No	", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you ı	must comple	te the prog	gram
	log in block 2.							
	2. LOG OF SUBSTITUTI	E PROGRA	AMS					
	In General: List each subs				s wherever p	ossible, if the	eir meaning	g is
	clear. If you need more spa							
	period, was broadcast by a			vision program ("substitute				
	under certain FCC rules, re							
	Do not use general categor							
	"NBA Basketball: 76ers vs.	Bulls."						
				er "Yes." Otherwise enter				
				asting the substitute prog the community to which th		oonood by th	a ECC ar	in
	the case of Mexican or Car							
				stem carried the substitute			with the n	nonth
	first. Example: for May 7 gi		, ,		1 0			
				ogram was carried by you				ately
	to the nearest five minutes.	Example:	a program car	ried by a system from 6:01	1:15 p.m. to 6	6:28:30 p.m.	should be	
	stated as "6:00–6:30 p.m."	er "R" if the	listed program	n was substituted for prog	ramming that	t vour system	was reau	ired
	to delete under FCC rules							
	was substituted for program							-9.4
	effect on October 19, 1976							
								Γ
	e		E PROGRAM	1		N SUBSTIT		7. REASON FOR
		2. LIVE?	3. STATION'S		5. MONTH	AGE OCCO 6. TIN		DELETION
	1. TITLE OF PROGRAM	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM -	- то	
							-	
						_		
						_		
							-	·
						_		
						_		
						_		
							•	

Accounting Period:	2019/2	FORM SA	1-2E. PAGE 6.
Name		S	STEM ID#
	CEQUEL COMMUNICATIONS LLC		062601
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 service s amount, se	,878.76
	COPYRIGHT ROYALTY FEE		
L 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 \$527,60(See page (vi) of the general instructions located in the paper SA1-2 form for more information. 	\$263,80(
	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-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 \$137,1	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		
	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	
	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	1
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	\$	67.00
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Register See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for mo		

Accounting Period:	2019/2					FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CEQUEL COMMUNICA					SYSTEM ID# 062601
M Channels	 to its subscribers, and (2) f 1. Enter the total number of system carried television 2. Enter the total number of on which the cable system 	the cable system's the cable system's the cable system's the original system of channels of activated channels of activated television the carried television set televisio	total number of activated of h the cable	hannels during the a		7 45
N Individual to Be Contacted	INDIVIDUAL TO BE CON we can contact about this a	statement of accour		EEDED (Identify an ir		
for Further Information		H BOGUE	3		Telephone	a (903) 579-3121
	TYLE	street, rural route, apart R, TX 75701 n, state, zip)	ment, or suite number)			
	Email	SARAH.BOGU	E@ALTICEUSA.COM		Fax (optional)	
O Certification	I, the undersigned, hereby (Owner other th (Agent of owner in line 1 of sp X (Officer or part in line 1 of sp	an corporation or p cother than corpor bace B and that the o ner) I am an officer (bace B. ment of account and rect to the best of m	one, <i>but only one</i> , of the bo partnership) I am the owne ation or partnership) I am owner is not a corporation o (if a corporation) or a partne I hereby declare under pena	xes.) er of the cable system the duly authorized a or partnership; or er (if a partnership) of alty of law that all stat nd belief, and are ma	Copyright Office regulations) as identified in line 1 of space gent of the owner of the cable the legal entity identified as o ements of fact contained here de in good faith.	e B; or e system as identified wner of the cable system
		Typed or printed	Enter an electronic signatu Enter signature using an "/ d name:			-
		Title: (Title of o	SVP, PROGRAMN			
		Date:			02/18/2020	

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	FORM SA1-2E. PAGE
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
EQUEL COMMUNICATIONS LLC	06260
 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 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name 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. 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 Assessmen
X	—
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
X days Line 3 Multiply line 2 by the number of days late and enter the sum here - X x	
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	
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	
(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@copyright.gov.	
 (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@copyright.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 	
 (interest charge) * To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i>. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.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. 	
(interest charge) * To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.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	
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