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.

**STATEMENT OF ACCOUNT** for Secondary Transmissions by

Cable Systems (Short Form)

General instructions are located

in the first tab of this workbook

## SA1-2E Short Form

Return completed workbook by email to:

## coplicsoa@loc.gov

For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150

Α	АССС	OUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20192 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
		CAMDEN CORP INVESTMENTS INC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		TRUVISTA
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		P.O. BOX 160 (Number, street, rural route, apartment, or suite number)
		CHESTER, SC 29706
		(City, town, state, zip)
С		<b>UCTIONS:</b> In line 1, give any business or trade names used to identify the business and operation of the system unless these 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:
		TRUVISTA
		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

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

02/28/2020

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

Name		
	CAMDEN CORP INVESTMENTS INC	7466
D	Instructions: List each separate community served by the cable system. A "communi "a separate and distinct community or municipal entity (including unincorporated con discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you lis as the "first community." Please use it as the first community on all future filings.	ty" is the same as a "community unit" as defined in FCC rules: mmunities within unincorporated areas and including single,
Area	Note: Entities and properties such as hotels, apartments, condominiums, or mobile h	ome parks should be reported in parentheses below the
Served	identified city.	
	CITY OR TOWN	STATE
First	CAMDEN	SC
Community	LUGOFF	SC
	CASSATT	SC
Rows as Necessar	y	

								FORM SA1	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					515	
	CAMDEN CORP INVES	IMENTS IN	С						746
E Secondary Fransmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in s system, that is, the retransmissi about other services (including p last day of the accounting perior Number of Subscribers: Bot down by categories of secondar each category by counting the m separately for the particular serv Rate: Give the standard rate of unit in which it is generally billed category, but do not include disc Block 1: In the left-hand block systems most commonly provid that applies to your system. Not categories, that person or entity subscriber who pays extra for ca first set" and would be counted of Subscriber who pays extra for ca first set" and would be counted of	pace E should on of television bay cable) in s d (June 30 or I h blocks in spa y transmission umber of billin vice at the rate charged for ea l. (Example: "\$ counts allowed k in space E, th e to their subs e: Where an in should be cou- able service to once again uno	d cover a and ra pace F Decemb ace E ca servic gs in the indicat ch cate 320/mth I for adv ne form cribers. dividua unted as additio der "Se	all categories adio broadcast , not here. All t ber 31, as the c all for the numi e. In general, y nat category (th ted—not the nu gory of service "). Summarize vance paymen lists the categ Give the num al or organizati s a subscriber nal sets would rvice to additio	of seconda s by your s he facts yo case may b ber of subs you can co- he number umber of se any stand t ories of se ber of subs on is receiv- in each ap be include nal set(s). <sup>2</sup>	system to subsc ou state must be be) scribers to the c mpute the numi of persons or o ets receiving se both the amount ard rate variation condary transm scribers and rate ving service tha plicable catego ed in the count of	ribers. Giv e those exi able syste ber of subs rganization rvice) c of the cha ons within a hission serv e for each t falls unde ry. Exampl under "Ser	e information sting on the m, broker scribers in ns charge arge and the a particular rate vice that cable listed category er different e: a residentia vice to the	
	<b>Block 2:</b> If your cable system printed in block 1 (for example, with the number of subscribers a sufficient.	tiers of service	s that i	nclude one or i	more seco	ndary transmiss	sions), list	them, togethe	
	BLC	DCK 1					BLOCH		- 
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential: • Service to first set • Service to additional set(s)		2,070	27.99					
	• FM radio (if separate rate) Motel, hotel		12	5.95*/mth					
	Commercial			0.00 /////					
	Converter     Residential				*Avg p	or l Init			
	Non-residential				568 Un				
F Services Other Than Secondary ransmissions: Rates	SERVICES OTHER THAN SEC In General: Space F calls for ra not covered in space E, that is, service for a single fee. There a furnished at cost or (2) services amount of the charge and the u enter only the letters "PP" in the Block 1: Give the standard ra Block 2: List any services tha listed in block 1 and for which a brief (two- or three-word) descri	te (not subscri those services re two exception or facilities fur hit in which it is rate column te charged by t your cable sy separate char	ber) inf that ar ons: yo nished s usuall the cab ystem fu ge was de the	ormation with e not offered ir u do not need to nonsubscrit y billed. If any ole system for e urnished or offer made or estat	respect to n combinat to give rate pers. Rate rates are of each of the ered during	tion with any set e information sho information sho charged on a va e applicable serve the accounting	condary tra oncerning ( ould include nriable per- vices listed g period tha	ansmissioi 1) service: e both the program basis at were nc	
		BLO	CK 1						
	CATEGORY OF SERVICE	BLOO RATE		GORY OF SEF	RVICE	RATE	CATEG	ORY OF SERVICE	RAT
	Continuing Services:	RATE	CATE Install	ation: Non-res	-	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services: • Pay cable		CATE Install • Mo	ation: Non-res	-	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services: • Pay cable • Pay cable—add'l channel	RATE	CATE Install • Mo • Co	ation: Non-resolutel, hotel	-	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services: • Pay cable	RATE	CATE Install • Mo • Co • Pa	ation: Non-res	sidential	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection	RATE	CATEC Install • Mc • Co • Pa • Pa	ation: Non-resolutel, hotel mmercial y cable	sidential	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection	RATE	CATEC Install • Mc • Co • Pa • Pa • Fir	ation: Non-res otel, hotel mmercial y cable y cable-add'l c	sidential hannel	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection •Burglar protection Installation: Residential	RATE 12.99	CATEC Install • Mc • Co • Pa • Pa • Fir • Bu Other	ation: Non-re- otel, hotel mmercial y cable y cable-add'l c e protection rglar protectior services:	sidential hannel	RATE	CATEGO	DRY OF SERVICE	RAT
	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)	RATE 12.99 39.99	CATE Install • Mc • Co • Pa • Pa • Fin • Bu Other • Re	ation: Non-re- otel, hotel mmercial y cable y cable-add'l c e protection rglar protectior services: connect	sidential hannel	RATE	CATEGO	DRY OF SERVICE	RAT
	Continuing Services: • Pay cable • Pay cable—add'l channel • Fire protection • Burglar protection Installation: Residential • First set • Additional set(s)	RATE 12.99 39.99	CATE Install • Mo • Co • Pa • Pa • Fir • Bu • Bu • Re • Dis	ation: Non-resolvel, hotel mmercial y cable y cable-add'l c e protection rglar protection services: connect sconnect	sidential hannel	30.00	CATEGO	DRY OF SERVICE	RAT
	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)	RATE 12.99 39.99	CATEC Install • Mc • Co • Pa • Pa • Fir • Bu Other • Re • Dis • Ou	ation: Non-re- otel, hotel mmercial y cable y cable-add'l c e protection rglar protectior services: connect	hannel		CATEGO	DRY OF SERVICE	RAT

ounting Period: 2	2019/2			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF			SYSTEM ID#
	CAMDEN CORP INVE			7466
G Primary ransmitters: Television	carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61(d substitute program basis, a <b>Substitute Basis Stations</b> 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 basis. For further informatic <b>Column 1:</b> List each station multicast stream associated "WETA-2" as the same on <b>Column 2:</b> Give the chann- of license. For example, W <b>Column 3:</b> Indicate in each educational station, by ente (for independent multicast) For the meaning of these to <b>Column 4:</b> Give the location	entify every television station (including m during the accounting period, <i>except</i> in effect on June 24, 1981, permitting th e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations ca lles, regulations, or authorizations: e in space G—but do list it in space I (th a substitute basis. also in space I, if the station was carried 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	(1) stations carried only on a part-t ne carriage of certain network progra 1(e)(2) and (4))]; and (2) certain stat arried by your cable system on a sub ne Special Statement and Program I d both on a substitute basis and also see page (v) of the general instruction orogram services such as HBO, ESF e-air designation. For example, report vision station for broadcasting over station, an independent station, or a for network multicast), "I" (for independent or "E-M" (for noncommercial education in the paper SA1-2 form. the community to which the station	ime basis under ams [sections tions carried on a ostitute program Log)—if the o on some other ions. PN, etc. Identify each ort multistream the air in its community the air in its community in 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
	wis	10	N	COLUMBIA, SC
	WIS-2	10.1	N-M	COLUMBIA, SC
ws as Necessary	WIS-3	10.2	N-M	COLUMBIA, SC
is necessary	WLTX	15	N	COLUMBIA, SC
	WLTX-2	15.1	N-M	COLUMBIA, SC
	WOLO	7	Ν	COLUMBIA, SC
	WOLO-2	7.1	N-M	COLUMBIA, SC
	WACH	22	<u>I</u>	COLUMBIA, SC
	WZRB	25		COLUMBIA, SC
	WKTC	31	· · · · · · · · · · · · · · · · · · ·	SUMTER, SC
	WKTC-2	31.1	I-M	SUMTER, SC
	WKTC-2 WKTC-3	31.1	I-M	SUMTER, SC SUMTER, SC
	WRJA	33	E	COLUMBIA, SC

EGAL NAME O									SYSTEM   74
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cal						н
eceivable if (1) on the basis of For detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: G	it is carried b monitoring, to prmation abou rm. dentify the call tate whether the radio stat this by placing Sive the station	y the sys be recein ut the Co I sign of the static tion's sig g a chec n's locati	I-Band FM Carriage: Under of stem whenever it is received a ived at the headend, with the opyright Office regulations on 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	at ti sy: thi sec	he system's he stem's FM ante s point, see par I by the cable s station is licens	adend, and (2 nna, during c ge (v) of the g ystem as a se sed by the FC	2) it can ertain st jeneral ii eparate :	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	ГГ	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
				$ \uparrow$	STILL OIGH		3,0		
NCAM	AM	<u>×</u>	CAMDEN, SC	-					
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Accounting Perio	od: 2019/2						FORM	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	CAMDEN CORP INVES	STMENTS	SINC					7466
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME		G			
I	In General: In space I, ident	-	-			tion that you	r cable eve	tem carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN				Ŭ			
Special	During the accounting per	-			sis anv noni	network telev	ision nroa	ram
Statement and		-	ui cabie syster	fi carry, on a substitute ba	515, any nom			
Program Log	broadcast by a distant sta	uon?					YES	× NO
	Note: If your answer is "No	o", leave the	e rest of this pa	ige blank. If your answer is	s "Yes," you i	must comple	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		oonood by th	a FCC ar	in
	the case of Mexican or Car			the community to which the community with which the				In
				stem carried the substitute			, with the n	nonth
	first. Example: for May 7 gi		, ,					
				ogram was carried by you				ately
	to the nearest five minutes.	Example:	a program car	ried by a system from 6:01	: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 systen	n was <i>rea</i> u	uired
	to delete under FCC rules							
	was substituted for program							-9.4
	effect on October 19, 1976							
			E PROGRAM			N SUBSTIT		7. REASON FOR
	3		3. STATION'S					DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	FROM -	- TO	
							-	
						_		
							-	
						_		
						_	-	
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						_		
							-	
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1			г		l	Г		7

Accounting Period:	2019/2		FORM S	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CAMDEN CORP INVESTMENTS INC		ę	8YSTEM ID# 7466
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amounts (gross receipts) paid to your cable system by subscribers for the system's set (as identified in space E) during the accounting period. For a further explanation of how 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.	econdary transm to compute this a	ission service amount, see \$ 34	
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 th • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less th • See page (vi) of the general instructions located in the paper SA1-2 form for more information	an \$527,600 n.	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 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			0.00
	Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD Add lines 1 and 2	2	- <u> </u>	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but m	ore than \$137,1	00)	
	1. Base amount under statutory formula	263,800.00		
	2. Enter amount of gross receipts from space K			
	3. Subtract line 2 from line 1			
	4. Enter the amount of gross receipts from space K			
	5. Enter the amount from line 3			
	6. Subtract line 5 from line 4			
	7. Multiply line 6 by .005 (enter figure here)			
	8. Interest charge. Enter the amount from line 4, space Q, page 8			0.00
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8			
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but	less than \$527	600)	
	1. Enter the amount of gross receipts from space K	347,635.80		
	2. Base amount under statutory formula	263,800.00		
	3. Subtract line 2 from line 1	83,835.80		
	4. Multiply line 3 by .01	. \$	838.36	
	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		\$	2,157.36
	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)	. \$	2,157.36	
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		\$	2,177.36
	Important: Your remittance must be in the form of an electronic payment paya See page i of the general instructions in the paper SA1-2 form fo	-		ghts!

Accounting Period:	2019/2		FORM SA1-2E. PAGE 7
Name		FOWNER OF CABLE SYSTEM: IRP INVESTMENTS INC	SYSTEM ID# 7466
M Channels	<ol> <li>to its subscribe</li> <li>1. Enter the tot system carrie</li> <li>2. Enter the tot on which the</li> </ol>	You must give (1) the number of channels on which the cable system carried television broadcast stations ers, and (2) the cable system's total number of activated channels during the accounting period. tal number of channels on which the cable ed television broadcast stations	13 126
N Individual to Be Contacted		<b>O BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> (Identify an individual to whom t about this statement of account.)	
for Further Information	Name	AUTUMN CASTLES Telephone 803	3-581-9148
	Address	P.O. BOX 160 (Number, street, rural route, apartment, or suite number) CHESTER, SC 29706 (City, town, state, zip)	
	Email	ACASTLES@TRUVISTA.BIZ Fax (optional)	
O Certification	I, the undersig     (Owr     (Age     ir     X     (Off     ir     I have examinare true, completed	N (This statement of account must be certified and signed in accordance with Copyright Office regulations) gened, hereby certify that (Check one, <i>but only one</i> , of the boxes.) ner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or ent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system n line 1 of space B and that the owner is not a corporation or partnership; or ficer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of n line 1 of space B. ed the statement of account and hereby declare under penalty of law that all statements of fact contained herein ete, and correct to the best of my knowledge, information, and belief, and are made in good faith. zion 1001(1986)]	em as identified
		X       /s/ Timothy A. Geyer         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: Timothy A. Geyer Title: CFO (Title of official position held in corporation or partnership)	
		Date: 2-28-2020	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
MDEN CORP INVESTMENTS INC	746
<ul> <li>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</li> <li>The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: <ul> <li>"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."</li> <li>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.</li> <li>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?</li> <li>NO</li> </ul> </li> </ul>	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	_
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
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 Assessmen
	Q Interest Assessmen
	Q Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmen
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