This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1) If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEM	ENT OF ACCOUNT	FOR COPYRIG	IT OFFICE USE ONLY	Return completed workbook by email to:
	ry Transmissions by	DATE RECEIVED	AMOUNT	coplicsoa@copyright.gov
General instru	ems (Short Form) ctions are located of this workbook	9/1/2020	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCOUNTING PERIOD COVERED E	BY THIS STATEMENT: (Y)	(YY/(Period))	
	2020/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
	20201	Barcode Data Filing Period (optional	- see instructions)	
Accounting Period				
	Instructions:			
В	Give the full legal name of the owner of th of the subsidiary, not that of the parent co	-	diary of another corporation, give the full corp	orate title
Owner	List any other name or names under which	the owner conducts the business of t	he cable system.	
	If there were different owners during the a single statement of account and royalty fe		he last day of the accounting period should su ing period.	bmit a
	Check here if this is the system's first filing			063482
	LEGAL NAME OF OWNER/MAILING	ADDRESS OF CABLE SYSTEM		
	CEQUEL COMMUNICATIONS LLC			
	BUSINESS NAME(S) OF OWNER OF	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 nu	imber)		
	TYLER, TX 75701 (City, town, state, zip)			

INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these

names already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.

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.

(Number, street, rural route, apartment, or suite number)

С

System

1

2

IDENTIFICATION OF CABLE SYSTEM:

(City, town, state, zip code)

CAMBRIDGE DEV CENTER MAILING ADDRESS OF CABLE SYSTEM:

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID:
Humo	CEQUEL COMMUNICATIONS LLC	063482
	Instructions: List each separate community served by the cable system. A "	
D	"a separate and distinct community or municipal entity (including unincorpo	
	discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community the	
	as the "first community." Please use it as the first community on all future f	
Area	Note: Entities and properties such as hotels, apartments, condominiums, or	mobile home parks should be reported in parentheses below the
Served	identified city.	
	CITY OR TOWN	STATE
First	CAMBRIDGE	ОН
Community	(CAMBRIDGE DEV CENTER)	
	ากการการการการการการการการการการการการกา	
Rows as Necessary		
Rows as necessary		

	LEGAL NAME OF OWNER OF C	ARI E QVQTEM						FORM SA1	
Name								515	06348
Е	SECONDARY TRANSMISSION								
L	In General: The information in s system, that is, the retransmission								
Secondary	about other services (including p								
Transmission	last day of the accounting period							ing on the	
Service: Sub-	Number of Subscribers: Bot	h blocks in spa	ce E call	for the number	of subso	ribers to the ca	ble system	, broken	
scribers and	down by categories of secondar								
Rates	each category by counting the n separately for the particular serv		<i>,</i>	0 , (,	charged	
	Rate: Give the standard rate of							and the	
	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. Not categories, that person or entity			-		-			
	subscriber who pays extra for ca						•		
	first set" and would be counted of								
	Block 2: If your cable system	-		•					
	printed in block 1 (for example, t						,		
	with the number of subscribers a sufficient.	and rates, in th	e right-ha	and block. A two	- or thre	e-word descript	ion of the s	service is	
		DCK 1					BLOCK	2	
		NO. OF		DATE	0.4.75			NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CATE	EGORY OF SEF	RVICE	SUBSCRIBERS	RATI
	Service to first set		0						
			0	-					
	Service to additional set(s)		U	-					
	• FM radio (if separate rate)								
	Motel, hotel		47	10 -1					
	Commercial		17	40.71					
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC		NSMISS						
-	In General: Space F calls for ra				pect to a	Il your cable sys	stem's serv	rices that were	
F	not covered in space E, that is, t								
	service for a single fee. There an		,	0			0()		
Services	furnished at cost or (2) services								
Other Than Secondary	amount of the charge and the ur enter only the letters "PP" in the		usually	filed. If any rate	es are cr	larged on a vari	able per-pi	ogram basis,	
ransmissions:	Block 1: Give the standard ra		he cable	system for each	n of the a	applicable servi	ces listed.		
Rates	Block 2: List any services that	• •			-	-			
	listed in block 1 and for which a				ed. List	these other ser	vices in the	e form of a	
	brief (two- or three-word) descrip	otion and inclue	de the ra	e for each.					
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SERVI	CE	RATE	CATEGO	ORY OF SERVICE	RATE
	Continuing Services:		Installa	ion: Non-reside	ential				
	• Pay cable	-	• Mote	el, hotel					
	 Pay cable—add'l channel 	-	• Com	mercial					
	 Fire protection 		• Pay	cable					
	 Burglar protection 		• Pay	cable-add'l char	nnel				
	Installation: Residential		• Fire	protection					
	• First set	-	• Burg	lar protection					
	 Additional set(s) 	-	Other s	ervices:					[
	• FM radio (if separate rate)		• Reco	onnect		-			T
	Converter		• Disc	onnect					
			• Outl	et relocation		-			
				et relocation e to new addres	s	-			

counting Period: 2	2020/1			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF			SYSTEM ID#
	CEQUEL COMMUNIC			063482
G Primary ansmitters: Television	PRIMARY TRANSMITTERS: In General: In space G, ide 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	TELEVISION entify every television station (including m during the accounting period, <i>excep</i> n effect on June 24, 1981, permitting t e)(2) and (4), or 76.63 (referring to 76.6 s explained in the next paragraph. : With respect to any distant stations of ules, regulations, or authorizations: e in space G—but do list it in space I (f a substitute basis. also in space I, if the station was carrie on concerning substitute basis stations n's call sign. <i>Do not</i> report origination d with a station according to its over-th	t (1) stations carried only on a part-tir he carriage of certain network program 51(e)(2) and (4))]; and (2) certain station arried by your cable system on a substitute the Special Statement and Program Lond ed both on a substitute basis and also , see page (v) of the general instruction program services such as HBO, ESPN e-air designation. For example, report evision station for broadcasting over the station, an independent station, or a million of the station, or a million of the station of the station (for network multicast), "I" (for independent or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station is	evision stations) ne basis under ms [sections ons carried on a stitute program og)—if the on some other ons. N, etc. Identify each t multistream ne air in its community noncommercial ndent), "I-M" nal multicast). s licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	WCMH-1	4	N	COLUMBUS, OH
	WSYX-1	6	N	COLUMBUS, OH
Necessary	WTTE-1	28	I	COLUMBUS, OH
	WWHO-1	53	I	COLUMBUS, OH

EGAL NAME OF								SYSTEM 0634
	every radio s	tation ca	arried on a separate and discre nerally receivable by your cab					н
eceivable if (1) on the basis of i For detailed info paper SA1-2 for Column 1: Id Column 2: S Column 3: If signal, indicate Column 4: G	it is carried by monitoring, to prmation abou m. lentify the call tate whether t the radio stati this by placing ive the statior	y the sys be recei t the Cc sign of e he static ion's sign g a checl 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 this point, see pa ed by the cable s he station is licens	adend, and (2 enna, during c ge (v) of the g system as a se sed by the FC	2) it can ertain st leneral ii 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	
0/122 01011	7 0. 1 111	0,5				0,0		
				[

Accounting Perio	od: 2020/1						FOR	VI SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	CEQUEL COMMUNICA	ATIONS L	LC					063482
	SUBSTITUTE CARRIAG)G			
I I	In General: In space I, ident				-	tion that you	r coblo cvo	tom corriad on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN				0		•••	
Special	During the accounting per	-			isis anv noni	network telev	ision nroa	ram
Statement and		-		in ourry, on a substitute be	loio, any nom			
Program Log	broadcast by a distant sta	luon?					YES	× NO
	Note: If your answer is "No	o", leave the	e rest of this pa	age blank. If your answer i	s "Yes," you 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				
				casting the substitute prog		aanaad by th		in
	the case of Mexican or Car			the community to which the community with which the			e FCC or,	In
				stem carried the substitute			, with the r	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 6:0′	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 systen	n was regi	ired
	to delete under FCC rules							
	was substituted for program							-9.4
	effect on October 19, 1976							
				A		N SUBSTIT		7. REASON FOR
	5	1				AGE OCCU 6. TII		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	
							-	
							-	
						_	-	
							-	
						_	-	
		+						
							-	
							-	
						_		
							-	·
						-	-	
							_	
						_	-	
						_	-	
1	1	1	1	1		1		1

Accounting Period:	2020/1	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SI	/STEM ID# 063482
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 transic (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 amount, se	,095.00
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 1 • 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 \$ 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		
	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)		
	Total Royalty FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	52.00	
Total Remittance Due		15.00	
	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
	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:	2020/1	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CEQUEL COMMUNICATIONS LLC	SYSTEM ID# 063482
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 .	4
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 RODNEY HASKINS Telephone	(903) 579-3152
O Certification	Address 3015 S SE LOOP 323 (Number, street, rural route, apartment, or suite number) TYLER, TX 75701 (City, town, state, zip) Email RODNEY.HASKINS@ALTICEUSA.COM Fax (optional) CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations) • I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable in line 1 of space B and that the owner is not a corporation or partnership; or X (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as ov in line 1 of space B.	B; or system as identified
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herei 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)] 	n
	Title: SVP, PROGRAMMING (Title of official position held in corporation or partnership) Date: 8/14/2020	

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.

QUEL COMMUNICATIONS LLC 0633 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS Image: Communication of the stability of the sta	counting Period: 2020/1		FORM SA1-2E. PAGE
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Statellite home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sectence: The Statellite home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sectence of providing tecondary transmissions of primary breadcast transmitters, the system Shall not include sub- scribers and amounts olicited from subcribers nearbing secondary transmissions cacted in the paper SA1-2 form. The operation of when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. The operating for the accounting period, d) the satellite carrier(s) below. Some of the satellite carriers to satellite dish owners? Note Note Note Note Note Note Note Note	GAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM
The Statilite Home Vewer Act of 1988 amended Title 17, section 111(0)(1)(A), of the Copyright Act by adding the following sentence. Image: The State of the Posts of the Posts of the Posts of the Posts of provide State on the Orizon of Provide State Orizon Oriz	QUEL COMMUNICATIONS LLC		0634
Name Name Mailing Address Mailing Address INTEREST ASSESSMENT Nume 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. Image Address Line 1 Enter the amount of late payment or underpayment. x	 The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright A lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable sy service of providing secondary transmissions of primary broadcast transmitters, the system scribers and amounts collected from subscribers receiving secondary transmissions pursual For more information on when to exclude these amounts, see the note on page (vii) of the general located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for seconde by satellite carriers to satellite dish owners? X NO 	rstem for the basic n shall not include sub- ant to section 119." I instructions	P Special Statement Concerning Gross Receipts Exclusion
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment Image: Comparison of interest assessment for one day late. Image: Comparison of interest assessment for one day late. Image: Comparison of interest assessment for one day late. Image: Comparison of interest assessment for one day late. Image: Comparison of interest asparing interest assessment for one day late. <	Name Name		
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment Image: Comparison of interest assessment for one day late. Image: Comparison of interest assessment for one day late. Image: Comparison of interest assessment for one day late. Image: Comparison of interest assessment for one day late. Image: Comparison of interest asparing interest assessment for one day late. <			
Line 2 Multiply line 1 by the interest rate* and enter the sum here			
x	You must complete this worksheet for those royalty payments submitted as a result of a late paym		Q
Line 3 Multiply line 2 by the number of days late and enter the sum here	You must complete this worksheet for those royalty payments submitted as a result of a late paym For an explanation of interest assessment, see page (viii) of the general instructions located in the		Q Interest Assessme
in space L, (page 6) block 1, line 2, or block 2 line 8, or block 3 line 6	You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
(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 list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	You must complete this worksheet for those royalty payments submitted as a result of a late payme For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
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 list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	You must complete this worksheet for those royalty payments submitted as a result of a late paym For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
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	You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
Address ID number First community served	You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
Address ID number First community served	You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
First community served	You must complete this worksheet for those royalty payments submitted as a result of a late paym For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
First community served	You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
	You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme
	You must complete this worksheet for those royalty payments submitted as a result of a late paymer For an explanation of interest assessment, see page (viii) of the general instructions located in the Line 1 Enter the amount of late payment or underpayment	e paper SA1-2 form.	Q Interest Assessme

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.