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.

DATE RECEIVED

02/17/21

\$

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 FOR COPYRIGHT OFFICE USE ONLY by email to: AMOUNT coplicsoa@loc.gov

ALLOCATION NUMBER

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

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		2020/2 Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20202 Barcode Data Filing Period (optional - see instructions)
Accounting Period		
		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
В		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
		NEX-TECH LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		145 N MAIN (Number, street, rural route, apartment, or suite number)
		LENORA, KS 67645 (City, town, state, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system 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)

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 suffciency of the fling, a determination that would be made by a court of law.

News	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
Name	NEX-TECH LLC	277
D Area	Instructions: List each separate community served by the cable system. A "co "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community tha as the "first community." Please use it as the first community on all future fili Note: Entities and properties such as hotels, apartments, condominiums, or n	ated communities within unincorporated areas and including single t you list will serve as a form of system identification hereafter knc ngs.
Area Served	identified city.	
	CITY OR TOWN	STATE
First	COURTLAND	KS
Community		
dd Rows as Necessary		
uu Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					FORM SA1	TEM I
Name	NEX-TECH LLC							010	277
Е	SECONDARY TRANSMISSION								
E.	In General: The information in s system, that is, the retransmissi	•		•		•			
Secondary	about other services (including p					•			
Transmission	last day of the accounting period							5	
Service: Sub-	Number of Subscribers: Bot	•					•		
scribers and	down by categories of secondar	•		•		•			
Rates	each category by counting the n separately for the particular serv		-	•••		•	-	s charged	
	<b>Rate:</b> Give the standard rate of							rge and the	
	unit in which it is generally billed	. (Example: "\$	20/mth"	'). Summarize a	ny standa	ard rate variation	ns within a	particular rate	
	category, but do not include disc								
	Block 1: In the left-hand block	•		•		•			
	systems most commonly provide that applies to your system. <b>Not</b>								
	categories, that person or entity			-		-			
	subscriber who pays extra for ca					d in the count u	nder "Serv	rice to the	
	first set" and would be counted o	•			• • •		- different	from the ope	
	<b>Block 2:</b> If your cable system printed in block 1 (for example, the system strength	•		•					
	with the number of subscribers a					•			
	sufficient.	,,	J						
	BLC	DCK 1 NO. OF					BLOCH	K 2 NO. OF	-
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATE	EGORY OF SEF	RVICE	SUBSCRIBERS	RA
	Residential:								
	<ul> <li>Service to first set</li> </ul>		110	30.00	PREMI	ERE		92	48
	<ul> <li>Service to additional set(s)</li> </ul>								
	<ul> <li>FM radio (if separate rate)</li> </ul>								
	Motel, hotel								
	Commercial								
	Converter								
	• Residential								
	Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA		SIONS: RATES	3				
F	In General: Space F calls for ra					all your cable sy	stem's ser	vices that were	
F	not covered in space E, that is,					•			
Services	service for a single fee. There a furnished at cost or (2) services	•			•		• •	,	
Other Than	amount of the charge and the u								
Secondary	enter only the letters "PP" in the	rate column.	-	-		-		-	
ransmissions:	Block 1: Give the standard ra								
Rates	<b>Block 2:</b> List any services tha				-	-			
	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) description and include the rate for each.								
		BLO						BLOCK 2	
	CATEGORY OF SERVICE	RATE		GORY OF SER	/ICE	RATE	CATEG	ORY OF SERVICE	RA
	Continuing Services:			ation: Non-resi					
	• Pay cable	78.00	• Mo	tel, hotel			Sports	& Entertain.	13
	• Pay cable—add'l channel		• Co	mmercial			Cinema		11
	Fire protection		-	y cable			НВО		17
	•Burglar protection		1 '	y cable-add'l ch	annel			me & TMC	10
	Installation: Residential		· ·	, e protection			Starz!		12
	First set	99.00		rglar protection					
	<ul> <li>Additional set(s)</li> </ul>	110.00	4	services:					
	• FM radio (if separate rate)			connect		30.00			
	• Converter		4	connect					
				tlet relocation		110.00			
			1 24				L		
			• Mo	ve to new addre	ess	99.00			

	LEGAL MARAE OF OWNED OF			SYSTEM ID
lame	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		2779 <sup>°</sup>
		τει εν/ιςιων		
G imary smitters: evision	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 <i>not</i> list the station here station was carried <i>only</i> on • List the station here, and a	entify every television station (including in during the accounting period, except in effect on June 24, 1981, permitting e)(2) and (4), or 76.63 (referring to 76. is explained in the next paragraph. is With respect to any distant stations of les, regulations, or authorizations: is in space G—but do list it in space I (	<i>t</i> (1) stations carried only on a part-t the carriage of certain network progra 61(e)(2) and (4))]; and (2) certain sta carried by your cable system on a su the Special Statement and Program ed both on a substitute basis and als	ime basis under ams [sections itions carried on a bstitute program Log)—if the o on some other
	Column 1: List each station 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	i's call sign. <i>Do not</i> report origination with a station according to its over-th	program services such as HBO, ESF ie-air designation. For example, repo- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indep or "E-M" (for noncommercial education suctions in the paper SA1-2 form. at the community to which the station	PN, etc. Identify each ort multistream the air in its community a noncommercial endent), "I-M" ional multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KSNC	2	Ν	GREAT BEND, KS
	KLNE	3	E	LEXINGTON, NE
s as Necessary	KSNB	5	N	SUPERIOR, NE
as Necessary				
	KBSH	7	N	HAYS, KS
	KBSH KOOD	7 9	N E	HAYS, KS HAYS, KS
	KOOD	9	E	HAYS, KS
	KOOD KGIN	9	E N	HAYS, KS GRAND ISLAND, NE
	KOOD KGIN KHGI	9 11 13	E N N	HAYS, KS GRAND ISLAND, NE KEARNEY, NE
	KOOD KGIN KHGI KFXL	9 11 13 14	E N N N	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE
	KOOD KGIN KHGI KFXL KSNB-DT2	9 11 13 14 15	E N N N	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL	9 11 13 14 15 16	E N N N	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW	9 11 13 14 15 16 23	E N N N N-M I I	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE WICHITA, KS
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW KSAS	9 11 13 14 15 16 23 24	E N N N N I I I N N	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE WICHITA, KS WICHITA, KS
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW KSAS KWCH-DT2	9 11 13 14 15 16 23 24 24 110	E N N N N-M I I I N N-M	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE WICHITA, KS WICHITA, KS
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW KSAS KWCH-DT2 KOOD-DT3	9 11 13 14 15 16 23 24 110 183	E N N N N-M I I N N-M E-M	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE WICHITA, KS WICHITA, KS WICHITA, KS
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW KSAS KWCH-DT2 KOOD-DT3 KMTW-DT3	9 11 13 14 15 16 23 24 24 110 183 186	E N N N N N-M I I N N-M E-M N-M	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW KSAS KWCH-DT2 KOOD-DT3 KMTW-DT3 KSAS-DT2	9 11 13 14 15 16 23 24 110 183 186 187	E N N N N N-M I I N N-M E-M N-M N-M	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE KEARNEY, NE WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW KSAS KWCH-DT2 KOOD-DT3 KMTW-DT3 KSAS-DT2 KOOD-DT2	9 11 13 14 15 16 23 24 110 183 186 187 189	E N N N N N-M i i i N N-M E-M N-M E-M	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW KSAS KWCH-DT2 KOOD-DT3 KMTW-DT3 KSAS-DT2 KOOD-DT2	9 11 13 14 15 16 23 24 110 183 186 187 189	E N N N N N-M i i i N N-M E-M N-M E-M	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW KSAS KWCH-DT2 KOOD-DT3 KMTW-DT3 KSAS-DT2 KOOD-DT2	9 11 13 14 15 16 23 24 110 183 186 187 189	E N N N N N-M i i i N N-M E-M N-M E-M	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS
	KOOD KGIN KHGI KFXL KSNB-DT2 KWBL KSCW KSAS KWCH-DT2 KOOD-DT3 KMTW-DT3 KSAS-DT2 KOOD-DT2	9 11 13 14 15 16 23 24 110 183 186 187 189	E N N N N N-M i i i N N-M E-M N-M E-M	HAYS, KS GRAND ISLAND, NE KEARNEY, NE LINCOLN, NE LINCOLN, NE KEARNEY, NE WICHITA, KS WICHITA, KS WICHITA, KS HAYS, KS WICHITA, KS

LEGAL NAME O		CABLE S	SYSTEM:					SYSTEM I
NEX-TECH	LLC							277
	t every radio s	station ca	arried on a separate and disci					н
all-band basis v	whose signals	were ge	enerally receivable by your cal	ole system during	g the accountir	ng period	<b>d</b> .	
eceivable if (1) on the basis of or detailed inf paper SA1-2 fo <b>Column 1:</b> Io <b>Column 2:</b> S <b>Column 3:</b> Io	) it is carried b monitoring, to ormation abou rm. dentify the call State whether t f the radio stat	y the sys be rece it the Co sign of the statio	<b>I-Band FM Carriage:</b> 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 of mark in the "S/D" column.	at the system's h system's FM an this point, see p	eadend, and (2 enna, during c age (v) of the g	2) it can certain s general i	be expected, tated intervals. nstructions in the.	Primary Transmitters Radio
Column 4: (	Give the station	n's locat	ion (the community to which the community with which the		•	C or, in	the case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
KQMA	FM		PHILLIPSBURG, KS					
KKDT	FM		BURDETT, KS			<b>-</b>		
KREP	FM		BELLEVILLE, KS			<b>-</b>		
						<b></b>		
						<b>-</b>		
						<b></b>		
						<b></b>		
						+		
						<b>-</b>		
						·		
						·		
						·		
						·		

Accounting Perio	od: 2020/2						FOR	M SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:					SYSTEM ID#
Name	NEX-TECH LLC							27797
	SUBSTITUTE CARRIAGE	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	ify every no.	<i>nnetwork televi</i> eriod, under sp	<i>sion program,</i> broadcast by ecific present and former F	y a <i>distant</i> sta CC rules, regi	ulations, or	authorization	s. For a further
Substitute Carriage:		-						AT-2 10mm.
Special	<ol> <li>SPECIAL STATEMENT</li> <li>During the accounting per</li> </ol>					ootwork tok	vicion prog	
Statement and	• • •	•	ul cable syster	il carry, on a substitute ba	1515, any noni			
Program Log	broadcast by a distant sta	luon?				L	YES	× NO
	Note: If your answer is "No	o", leave the	e rest of this pa	ge blank. If your answer i	s "Yes," you r	nust comp	lete the prog	Iram
	log in block 2.							
	2. LOG OF SUBSTITUTE			ata lina. I laa ah hua siatian		anaible if th		- 1-
	In General: List each subs clear. If you need more spa				s wnerever p	ossidie, it ti	neir meaning	g is
	5			vision program ("substitut	e program") t	hat, during	the account	ing
	period, was broadcast by a	distant sta	tion and that y	our cable system substitu	ted for the pro	ogramming	of another	station
	under certain FCC rules, re	•						
	Do not use general categor "NBA Basketball: 76ers vs.		ovies" or "bask	etball." List specific progra	am titles, for e	example, "I	Love Lucy	or
			dcast live, ent	er "Yes." Otherwise enter	"No."			
		•		asting the substitute prog				
	<b>Column 4:</b> Give the broat the case of Mexican or Car		,	the community to which th		•	the FCC or,	în
				stem carried the substitute		,	ls, with the n	nonth
	first. Example: for May 7 giv	ve "5/7."						
				ogram was carried by you	•			ately
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example:	a program car	ried by a system from 6:0	1:15 p.m. to b	5:28:30 p.m	. should be	
		er "R" if the	listed prograr	n was substituted for prog	ramming that	t your syste	em was <i>requ</i>	iired
	to delete under FCC rules a	and regulat	ions in effect d	uring the accounting period	od; enter the l	etter "P" if	the listed pro	
	was substituted for program	0	your system w	as permitted to delete uno	der FCC rules	s and regula	ations in	
	effect on October 19, 1976							
	S	UBSTITUT	E PROGRAM	1		N SUBST	URRED	7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. T FROM	TIMES — TO	DELETION
					·			
							_	
							_	
							_	
							_	
								··
							_	
							_	
							_	

Accounting Period:	FORM SA1-2E. F	PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:     SYSTEM       NEX-TECH LLC     2	M ID# 7797
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see 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.	
L Copyright Royalty Fee	<ul> <li>COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe:</li> <li>Complete block 1, block 2, or block 3.</li> <li>Use block 1 if the amount of gross receipts in space K is \$137,100 or less</li> <li>Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,800</li> <li>Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600</li> <li>See page (vi) of the general instructions located in the paper SA1-2 form for more information.</li> </ul>	
	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 this six-month accounting period is \$52.00	
	Line 1. Royalty fee for accounting period \$ 52.	00
	Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	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 <b>\$ 263,800.00</b>	
	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)	
		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	

0.00
52.00 15.00
67.00
of Copyrights!

Accounting Period:	2020/2		FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF (	OWNER OF CABLE SYSTEM:	SYSTEM ID# 27797
M Channels	CHANNELS Instructions: Yo to its subscribers 1. Enter the tota	ou must give (1) the number of channels on which the cable system carried television broadcast stations s, and (2) the cable system's total number of activated channels during the accounting period.	18
	2. Enter the tota on which the c	I number of activated channels able system carried television broadcast stations cast services	341
N Individual to Be Contacted		<b>D BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> (Identify an individual to whom about this statement of account.)	
for Further Information	Name Address	Scott Roe       Telephone       785-0         2418 Vine Street       (Number, street, rural route, apartment, or suite number)       (Number, street, rural route, apartment, or suite number)	625-7070
	Email	Hays, KS 67601         (City, town, state, zip)         sroe@nex-tech.com         Fax (optional)	
O Certification	<ul> <li>I, the undersigned (Owned)</li> <li>(Owned)</li> <li>(Agen in in</li></ul>	(This statement of account must be certified and signed in accordance with Copyright Office regulations) ed, hereby certify that (Check one, <i>but only one</i> , of the boxes.) er other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or it of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system line 1 of space B and that the owner is not a corporation or partnership; or cer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the line 1 of space B. d the statement of account and hereby declare under penalty of law that all statements of fact contained herein te, and correct to the best of my knowledge, information, and belief, and are made in good faith. on 1001(1986)]	

	X /s/ Rhonda S. Goddard
	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: Rhonda S. Goddard
	Chief Financial Officer icial position held in corporation or partnership)
Date:	02/23/2021

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.

unting Period: 2020/2	FORM SA1-2E. PAG
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM
-TECH LLC	277
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	P Special Statemer Concerning Gros Receipts Exclusio
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?	
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
Line 1. Enter the amount of late navment or undernavment	Interest Assessm
Line 1 Enter the amount of late payment or underpayment	Interest Assessm
x	Interest Assessm
Line 1 Enter the amount of late payment or underpayment	Interest Assessm
x	Interest Assessm
Line 2       Multiply line 1 by the interest rate* and enter the sum here       -         x	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
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Line 2       Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessm

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.