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	ACC	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		Barcode Data Filing Period (optional - see instructions)
counting Period		
		Instructions:
В		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
		CABLE & CELLULAR COMMUNICATIONS, LLC
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		P.O. BOX 280 (Number, street, rural route, apartment, or suite number)
		CIRCLE, MT 59215 (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)

FOR COPYRIGHT OFFICE USE ONLY

\$

AMOUNT

ALLOCATION NUMBER

DATE RECEIVED

2/4/2021

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.

Nama	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
Name	CABLE & CELLULAR COMMUNICATIONS, LLC	6213
D	Instructions: List each separate community served by the cable system. A "c "a separate and distinct community or municipal entity (including unincorpor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community th as the "first community." Please use it as the first community on all future f	community" is the same as a "community unit" as defined in FCC rules: rated communities within unincorporated areas and including single, nat you list will serve as a form of system identification hereafter know
Area	Note: Entities and properties such as hotels, apartments, condominiums, or identified city.	
Served		
	CITY OR TOWN	STATE
First	MILES CITY	MT
Community		
dd Rows as Necessary		

	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					FORM SA1-	TEM ID	
Name	CABLE & CELLULAR C	OMMUNICA		S, LLC					6213	
_	SECONDARY TRANSMISSION	SERVICE: SI	JBSCRI		ATES					
E	In General: The information in s					ry transmission	service of t	the cable		
	system, that is, the retransmission									
Secondary	about other services (including p						those exist	ting on the		
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Both						ble system	broken		
scribers and	down by categories of secondary						,	,		
Rates	each category by counting the n	-				•				
	separately for the particular serv									
	Rate: Give the standard rate c unit in which it is generally billed	-	-	•			-	-		
	category, but do not include disc	• •	,		ny stanua		is within a	particular rate		
	Block 1: In the left-hand block				ies of sec	ondary transmi	ssion servi	ce that cable		
	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						Idel Selvi			
	Block 2: If your cable system					service that are	e different f	rom those		
	printed in block 1 (for example, t						,.			
	with the number of subscribers a sufficient.	and rates, in th	e right-ha	and block. A tv	vo- or thre	e-word descrip	tion of the s	service is		
		DCK 1					BLOCK	(2		
	NO. OF CATEGORY OF SERVICE SUBSCRIBERS RATE CATEGORY						RVICE	NO. OF SUBSCRIBERS		
	Residential:						-			
	Service to first set		1,762	37.45						
	Service to additional set(s)									
	• FM radio (if separate rate)									
	Motel, hotel		96	11.20						
	Commercial									
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	SIONS: RATE	s					
F	In General: Space F calls for rat									
•	not covered in space E, that is, t service for a single fee. There ar									
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 var	iable per-p	rogram basis,		
Secondary	enter only the letters "PP" in the		ho ochlo	ovetem for or	ab of the	appliaghla agri	and listed			
Fransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that							were not		
nutoo	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) description and include the rate for each.									
		BLO	CK 1				BLOCK 2			
	CATEGORY OF SERVICE	RATE	CATEG	ORY OF SER	VICE	RATE	CATEGO	ORY OF SERVICE	RATE	
				tion: Non-res	idential					
	Continuing Services:			el, hotel			CHOIC		127.4	
	• Pay cable						ULTIM	AIE	4 4 7 4	
	• Pay cable • Pay cable—add'l channel		• Com	nmercial			0		142.4	
	Pay cable Pay cable—add'l channel Fire protection		• Com • Pay	cable					13.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection 		• Com • Pay • Pay	cable cable-add'l ch	annel		SHOW	/ENCORE FIME/TMC	13.9 13.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential 		• Con • Pay • Pay • Fire	cable cable-add'l ch protection	annel				13.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set 	25.00	• Con • Pay • Pay • Fire • Burg	cable cable-add'l ch protection glar protection	annel		SHOW		13.9 13.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) 	25.00	• Com • Pay • Pay • Fire • Burg Other s	cable cable-add'l ch protection glar protection ervices:	annel		SHOW		13.9 13.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 	25.00	• Com • Pay • Pay • Fire • Burg Other s • Rec	cable cable-add'l ch protection glar protection ervices: onnect	annel	25.00	SHOW		13.9 13.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) 	25.00	• Com • Pay • Pay • Fire • Burç Other s • Rec • Disc	cable cable-add'l ch protection glar protection ervices: onnect connect	annel	25.00	SHOW		13.9 13.9	
	 Pay cable Pay cable—add'l channel Fire protection Burglar protection Installation: Residential First set Additional set(s) FM radio (if separate rate) 	25.00	• Con • Pay • Pay • Fire • Burg Other s • Rec • Disc • Outl	cable cable-add'l ch protection glar protection ervices: onnect		25.00	SHOW		13.9 13.9	

counting Period:	2020/2			FORM SA1-2E. PAGE 3
Name	LEGAL NAME OF OWNER OF	- CABLE SYSTEM:		SYSTEM ID
	CABLE & CELLULAR	R COMMUNICATIONS, LLC		62131
	PRIMARY TRANSMITTERS:			
G Primary Transmitters: Television	carried by your cable system FCC rules and regulations in 76.59(d)(2) and (4), 76.61(e substitute program basis, a 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 informatic Column 1: List each station multicast stream associated "WETA-2" as the same on the Column 2: Give the channel of license. For example, W Column 3: Indicate in each educational station, by enter (for independent multicast), For the meaning of these to Column 4: Give the location	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	t (1) stations carried only on a part-t he carriage of certain network progra 51(e)(2) and (4))]; and (2) certain sta arried by your cable system on a sub the Special Statement and Program I ed both on a substitute basis and also , see page (v) of the general instruct program services such as HBO, ESF e-air designation. For example, repo- evision station for broadcasting over station, an independent station, or a (for network multicast), "I" (for indepo- or "E-M" (for noncommercial education uctions in the paper SA1-2 form. t the community to which the station	time basis under ams [sections ations carried on a bstitute program Log)—if the o on some other tions. PN, etc. Identify each ort multistream the air in its community a noncommercial eendent), "I-M" ional multicast).
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	КНМТ	22	N	Billings, MT
	KSVI	18	N	Billings, MT
Add Rows as Necessary	KTVQ	10	N	Billings, MT
JO ROWS as inecessary	KUSM	8	E	Bozeman, MT
	KULR	11	N	Billings, MT
	KTVQ-CW	10	N-M	Billings, MT
	KTGF-ME.TV	14	N-M	Great Falls, MT
		14	N	
				Billings, MT
		11	N	Billings, MT
	KHMT-HD	22	N	Billings, MT
	KSVI-HD	18	N	Billings, MT
	KUSM-HD	8	E	Bozeman, MT
	KTVQ CW-HD	10	N-M	Billings, MT
				I
		,		

all-band basis whose Special Instructions eceivable if (1) it is c on the basis of monito For detailed informati baper SA1-2 form. Column 1: Identify Column 2: State w Column 3: If the ra- signal, indicate this b Column 4: Give the Mexican or Canadian	ry radio station e signals were g s Concerning carried by the sy toring, to be rec tion about the C fy the call sign o whether the stat radio station's si by placing a che he station's loca	carried on a separate and discre generally receivable by your cab All-Band FM Carriage: Under C system whenever it is received a ceived at the headend, with the s Copyright Office regulations on t of each station carried. ation is AM or FM. signal was electronically process eck mark in the "S/D" column. ation (the community to which the by, the community with which the	ble system during Copyright Office n t the system's he system's FM ante this point, see par this point, see par the by the cable s he station is licens	the accounting egulations, an adend, and (2 mna, during ce ge (v) of the ge ystem as a se sed by the FCC	g period FM sigr) it can I ertain st eneral ir parate a	i. nal is generally be expected, ated intervals. nstructions in the. and discrete	H Primary Transmitters Radio
eceivable if (1) it is c on the basis of monit for detailed informati paper SA1-2 form. Column 1: Identify Column 2: State w Column 3: If the ra- ignal, indicate this b Column 4: Give the Mexican or Canadian	carried by the sy itoring, to be rec tion about the C fy the call sign o whether the stat radio station's si by placing a che he station's loca n stations, if any	system whenever it is received a ceived at the headend, with the Copyright Office regulations on t of each station carried. ation is AM or FM. signal was electronically process eck mark in the "S/D" column. ation (the community to which the by, the community with which the	t the system's he system's FM ante this point, see par ed by the cable s he station is licens station is identifi	adend, and (2 anna, during ce ge (v) of the ge ystem as a se sed by the FCC ed).) it can I ertain sta eneral ir parate a C or, in 1	be expected, ated intervals. nstructions in the. and discrete the case of	Transmitters
CALL SIGN AM	A or FM S/D	D LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
					·		
							1
							4
							4
							1

Accounting Perio	od: 2020/2						I	FORM	SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:						SYSTEM ID#
Name	CABLE & CELLULAR	COMMUN	NICATIONS,	LLC					62131
	SUBSTITUTE CARRIAG	E: SPECIA	AL STATEME	ENT AND PROGRAM LC	DG				
I	In General: In space I, ident								
	substitute basis during the a	•••		•					
Substitute	explanation of the programn	ning that mu	ist be included	in this log, see page (v) of t	the general in	structions	n the pap	per SA	1-2 form.
Carriage:	1. SPECIAL STATEMEN	T CONCEP	RNING SUBS	TITUTE CARRIAGE					
Special	 During the accounting pe 	riod, did you	ur cable syste	m carry, on a substitute ba	asis, any noni	network te	levision (progra	am
Statement and	broadcast by a distant sta		5						× NO
Program Log	bioaucasi by a distant sta						YE	SL	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 com	olete the	progr	am
	log in block 2.								
	2. LOG OF SUBSTITUT	E PROGRA	AMS						
	In General: List each subs			ate line. Use abbreviation	s wherever p	ossible. if	their mea	anina	is
	clear. If you need more spa	ace, please	add additiona	I rows to the tables.		,		5	
				vision program ("substitute	e program") t	hat, during	g the acc	ountir	ng
	period, was broadcast by a								
	under certain FCC rules, re								
	Do not use general catego		ovies" or "bask	etball." List specific progra	am titles, for e	example, '	I Love Lu	ucy" o	or
	"NBA Basketball: 76ers vs.			<i></i>	<i>"</i>				
				er "Yes." Otherwise enter					
				casting the substitute prog the community to which th		concod by		or in	2
	the case of Mexican or Cal						ine FCC	, II	1
				stem carried the substitute			als with t	the m	onth
	first. Example: for May 7 gi		, mien year ey		o program o		, with t		
	. , , ,		e substitute pr	ogram was carried by you	ır cable syste	m. List the	e times a	ccurat	telv
	to the nearest five minutes								,
	stated as "6:00–6:30 p.m."								
		"D" "C ()	listed program	m waa aubatitutad far prog	ramming that	t vour svs	em was	requir	red
	Column 7: Enter the let	ter "R" if the	e listed prograf	it was substituted for prog	n annin ng ana	-)) -			
	to delete under FCC rules	and regulat	ions in effect o	luring the accounting perio	od; enter the	letter "P" i			
	to delete under FCC rules was substituted for program	and regulat	ions in effect o	luring the accounting perio	od; enter the	letter "P" i			
	to delete under FCC rules	and regulat	ions in effect o	luring the accounting perio	od; enter the	letter "P" i			
	to delete under FCC rules was substituted for program	and regulat	ions in effect o	luring the accounting perio	od; enter the der FCC rules	letter "P" i s and regu	lations ir		
	to delete under FCC rules was substituted for prograr effect on October 19, 1976	and regulat mming that <u>;</u> ;	ions in effect o your system w	luring the accounting perio as permitted to delete und	od; enter the der FCC rules WHE	letter "P" i s and regu	Iations ir	n İ	gram
	to delete under FCC rules was substituted for prograr effect on October 19, 1976	and regulat	ions in effect o your system w E PROGRAM	luring the accounting perio as permitted to delete und	od; enter the der FCC rules WHE CARRI	letter "P" i s and regu N SUBST AGE OCO	Iations ir	n İ	gram 7. REASON FOR
	to delete under FCC rules was substituted for prograr effect on October 19, 1976	und regulat mming that UBSTITUT	ions in effect of your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	WHE CARRI 5. MONTH	letter "P" i s and regu N SUBST AGE OCC	TITUTE CURREE TIMES	n İ	gram
	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	and regulat	ions in effect o your system w E PROGRAM	luring the accounting perio as permitted to delete und	od; enter the der FCC rules WHE CARRI	letter "P" i s and regu N SUBST AGE OCO	TITUTE CURREE TIMES		gram 7. REASON FOR
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	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	und regulat mming that UBSTITUT	ions in effect of your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	WHE CARRI 5. MONTH	letter "P" i s and regu N SUBST AGE OCC	TITUTE CURREE TIMES		gram 7. REASON FOR
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	to delete under FCC rules was substituted for prograr effect on October 19, 1976 S	und regulat mming that UBSTITUT	ions in effect of your system w E PROGRAM 3. STATION'S	Juring the accounting period vas permitted to delete und	WHE CARRI 5. MONTH	letter "P" i s and regu N SUBST AGE OCC	TITUTE CURREE TIMES		gram 7. REASON FOR

Accounting Period:	2020/2		FORM S	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: CABLE & CELLULAR COMMUNICATIONS, LLC		Ş	62131
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amall amounts (gross receipts) paid to your cable system by subscribers for the system's s (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 \$ 42	
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 \$137,000 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 • Dependent of the set of t	nan \$527,600 n.	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR			
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that accounting period is \$52.00	you must pay for	this six-mon	
	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		
	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	t less than \$527	,600)	
	1. Enter the amount of gross receipts from space K	424,196.15		
	2. Base amount under statutory formula \$	263,800.00		
	3. Subtract line 2 from line 1 \$	160,396.15		
	4. Multiply line 3 by .01		1,603.96	
	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		\$	2.922.96
			•	_,
	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)	. \$	2,922.96	
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		\$	2,942.96
	Important: Your remittance must be in the form of an electronic payment pay. See page i of the general instructions in the paper SA1-2 form fo	-		ghts!

Accounting Period:	2020/2				FORM SA1-2E. PAGE 7.
Name		WNER OF CABLE SYSTEM: LULAR COMMUNICATION	S, LLC		SYSTEM ID# 62131
M Channels	to its subscribers 1. Enter the total system carried 2. Enter the total on which the ca	, and (2) the cable system's to number of channels on which television broadcast stations number of activated channels able system carried television		eriod.	13
N Individual to Be Contacted		BE CONTACTED IF FURTH bout this statement of accour	ER INFORMATION IS NEEDED (Identify an individual to v .)	vhom	
for Further Information	Name	Annie Edwards		Telephone 406-	-485-3301
	Address	P.O. Box 280 (Number, street, rural route, aparte	ent, or suite number)		
		Circle, MT 59215 (City, town, state, zip)			
	Email	mrtcreg@midriv	Fax (opt	ional)	
O Certification	I, the undersigne (Owne (Agent in I	ed, hereby certify that (Check c r other than corporation or p t of owner other than corpora ine 1 of space B and that the c	st be certified and signed in accordance with Copyright O ne, <i>but only one</i> , of the boxes.) artnership) I am the owner of the cable system as identified tion or partnership) I am the duly authorized agent of the o vner is not a corporation or partnership; or a corporation) or a partner (if a partnership) of the legal ent	in line 1 of space B; or wner of the cable system	
	I have examined	e, and correct to the best of my	nereby declare under penalty of law that all statements of fa knowledge, information, and belief, and are made in good fa		
			X /s/ Dennis Green Enter an electronic signature on the line above to certify this s Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	tatement.	
		Typed or printed			
		Title: (Title of o	President		
		Date:	1/2	6/21	

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. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
BLE & CELLULAR COMMUNICATIONS, LLC	6213
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 YES. Enter the total here and list the satellite carrier(s) below. \$	P Special Statement Concerning Gross Receipts Exclusion
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
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
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessmer
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme
Line 1 Enter the amount of late payment or underpayment	Q Interest Assessme

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.