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	HT OFFICE USE ONLY	Return completed workbook by email to:		
for Seconda	ary Transmissions by	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>		
General instru	ems (Short Form) uctions are located o of this workbook	2/23/2022	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150			
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y)	/YY/(Period))			
	2021/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31			
	2021	Barcode Data Filing Period (optiona	I - see instructions)			
Accounting Period						
B Owner	the subsidiary, not that of the parent corp List any other name or names under whic	boration.	diary of another corporation, give the full corp ne cable system. he last day of the accounting period should su			
	Check here if this is the system's first filin	ment covering the entire accounting pe	riod.	62652		
	LEGAL NAME OF OWNER/MAILING	G ADDRESS OF CABLE SYSTEM				
	Parish Communications LTD					
	BUSINESS NAME(S) OF OWNER OF	CABLE SYSTEM (IF DIFFERENT)			
	MAILING ADDRESS OF OWNER OF	CABLE SYSTEM				
	803 W. Midland Road (Number, street, rural route, apartment, or suite	number)				
	Auburn, MI 48611 (City, town, state, zip)					
С	INSTRUCTIONS: In line 1, give any busin names already appear in space B. In line					
System	1 IDENTIFICATION OF CABLE SYSTEM:					
	MAILING ADDRESS OF CABLE SYSTEM	1:				
	2 (Number, street, rural route, apartment, or sulte i	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 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.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
	Parish Communications LTD	62652
D	Instructions: List each separate community served by the cable system. A "commu separate and distinct community or municipal entity (including unincorporated cor unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile	mmunities within unincorporated areas and including single, discrete serve as a form of system identification hereafter known as the "first
Area Served	city.	
	CITY OR TOWN	STATE
First	Lee Twp.	MI
Community	Mt. Haley	MI
	Homer Porter	MI
dd Rows as Necessary	Jerome	MI
	Greendale	MI

	LEGAL NAME OF OWNER OF C								TEM ID
Name								313	6265
	Parish Communications	SLID							0100
_	SECONDARY TRANSMISSION	SERVICE: SL	JBSCRIB	ERS AND RAT	TES				
E	In General: The information in s	•		Ũ					
Cocondom	system, that is, the retransmissi								
Secondary Transmission	about other services (including particular to a service of the accounting period						those exis	ang on the	
Service: Sub-	Number of Subscribers: Both						ble system	n, broken	
scribers and	down by categories of secondar								
Rates	each category by counting the n separately for the particular server	•	<i>.</i>	0 , (,	s charged	
	Rate: Give the standard rate of							ge and the	
	unit in which it is generally billed				y standaı	rd rate variation	s 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. Not								
	categories, that person or entity						•		
	subscriber who pays extra for ca					I in the count ur	nder "Servi	ice to the	
	first set" and would be counted of Block 2: If your cable system					service that are	e different	from those	
	printed in block 1 (for example, t	-		•					
	with the number of subscribers a	and rates, in th	e right-ha	nd block. A tw	o- or thre	e-word descript	ion of the	service is	
	sufficient.	DCK 1						()	
	BLU	NO. OF	:				BLOC	NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CATE	GORY OF SE	RVICE	SUBSCRIBERS	RAT
	Residential:								
	 Service to first set 		287	74.35					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel								
	Commercial								
	Converter								
	Residential Non-residential								
	SERVICES OTHER THAN SEC	ONDARY TRA	NSMISS	ONS: RATES					
E	In General: Space F calls for ra	te (not subscril	ber) inforr	mation with res	pect to a	ll your cable sy	stem's serv	vices that were	
F	not covered in space E, that is, t					-			
Services	service for a single fee. There al furnished at cost or (2) services	•			0		0 (,	
Other Than	amount of the charge and the ur								
Secondary	enter only the letters "PP" in the								
ransmissions: Rates	Block 1: Give the standard rat Block 2: List any services that	• •				••			
Nates	listed in block 1 and for which a								
	brief (two- or three-word) descrip								
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE		ORY OF SERV	ICE	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services:		Installat	ion: Non-resid	dential				
	• Pay cable	25.00	• Mote	l, hotel					
	 Pay cable—add'l channel 		• Com	mercial					
	Fire protection		• Pay	cable					
	 Burglar protection 		-	cable-add'l cha	annel				
	Installation: Residential			protection					
	• First set	55.00	Ŭ	lar protection					
	Additional set(s)	20.00	Other se						
	 FM radio (if separate rate) 			onnect		35.00			
				-					
	• Converter			onnect		-			
	• Converter		• Outle	onnect et relocation e to new addre		- 20.00 55.00			

	LEGAL NAME OF OWNER C	F CABLE SYSTEM:		SYSTE				
lame	Parish Communicati	ons LTD		6				
	PRIMARY TRANSMITTERS:	TELEVISION						
G	In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, <i>except</i> (1) stations carried only on a part-time basis under							
G		m during the accounting period, except (in effect on June 24, 1981, permitting the						
rimary	76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61						
smitters: evision		as explained in the next paragraph. s: With respect to any distant stations ca	rried by your cable system on a sub	ostitute program				
	basis under specific FCC rules, regulations, or authorizations: • Do <i>not</i> list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the							
	station was carried only on a substitute basis.							
		also in space I, if the station was carried on concerning substitute basis stations, s						
	basis. For further information concerning substitute basis stations, see page (v) of the general instructions. Column 1: List each station's call sign. <i>Do not</i> report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream							
	"WETA-2" as the same on	5	air designation. For example, repo	on mulustream				
		el number the FCC assigned to the telev /RC is channel 4 in Washington, D.C.	rision station for broadcasting over	the air in its community				
	Column 3: Indicate in each	h case whether the station is a network s	· · · · · · · · · · · · · · · · · · ·					
		ering the letter "N" (for network), "N-M" (f , "E" (for noncommercial educational), or						
	For the meaning of these t	erms, see page (iv) of the general instruction of each station. For U.S. stations, list	ctions in the paper SA1-2 form.	,				
		n of each station. For U.S. stations, list indicate the name of the	•					
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	WNEM	30	N	BAY CITY, MI				
	WNEM-DT2	30.2	I-M	BAY CITY, MI				
vs as Necessary	WNEM-DT3	30.3	I-M	BAY CITY, MI				
	WNEM-DT4	30.4	I-M	BAY CITY, MI				
	wsмн	16	Ν					
		10	IN	FLINT, MI				
	WSMH-DT2	16.2	I-M	FLINT, MI FLINT, MI				
	WSMH-DT2	16.2	I-M	FLINT, MI				
	WSMH-DT2 WSMH-DT3	16.2 16.3	I-M I-M	FLINT, MI FLINT, MI				
	WSMH-DT2 WSMH-DT3 WJRT	16.2 16.3 12	I-M I-M N	FLINT, MI FLINT, MI FLINT, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2	16.2 16.3 12 12.2	I-M I-M N I-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3	16.2 16.3 12 12.2 12.3	I-M I-M N I-M I-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI	16.2 16.3 12 12.2 12.2 12.3 18	I-M I-M N I-M I-M N	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI WEYI-DT2	16.2 16.3 12 12.2 12.3 18.3	I-M I-M N I-M I-M N I-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI WEYI-DT2 WEYI-DT3 WAQP	16.2 16.3 12 12.2 12.3 18 18.2	I-M I-M N I-M I-M N I-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI WEYI-DT2 WEYI-DT2 WEYI-DT3 WAQP WDCQ	16.2 16.3 12 12.2 12.3 18 18 18.2 18.3 36 15	I-M I-M N I-M I-M I-M I-M I-M I E	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI BAD AXE, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI WEYI-DT2 WEYI-DT3 WAQP WDCQ WDCQ-DT2	16.2 16.3 12 12.2 12.3 18.3 18.2 18.3 36 15 15.2	I-M I-M N I-M I-M I-M I-M I-M I E E E-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI BAD AXE, MI BAD AXE, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI-DT3 WEYI-DT3 WAQP WDCQ WDCQ-DT2 WDCQ-DT3	16.2 16.3 12 12.2 12.3 18 18 18.2 18.3 36 15 15.2 15.3	I-M I-M N I-M I-M I-M I-M I-M I-M E E E-M E-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI BAD AXE, MI BAD AXE, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI WEYI-DT2 WEYI-DT3 WAQP WDCQ WDCQ-DT2	16.2 16.3 12 12.2 12.3 18.3 18.2 18.3 36 15 15.2	I-M I-M N I-M I-M I-M I-M I-M I E E E-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI BAD AXE, MI BAD AXE, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI-DT3 WEYI-DT3 WAQP WDCQ WDCQ-DT2 WDCQ-DT3	16.2 16.3 12 12.2 12.3 18 18 18.2 18.3 36 15 15.2 15.3	I-M I-M N I-M I-M I-M I-M I-M I-M E E E-M E-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI BAD AXE, MI BAD AXE, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI-DT3 WEYI-DT3 WAQP WDCQ WDCQ-DT2 WDCQ-DT3	16.2 16.3 12 12.2 12.3 18 18 18.2 18.3 36 15 15.2 15.3	I-M I-M N I-M I-M I-M I-M I-M I-M E E E-M E-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI BAD AXE, MI BAD AXE, MI				
	WSMH-DT2 WSMH-DT3 WJRT WJRT-DT2 WJRT-DT3 WEYI-DT3 WEYI-DT3 WAQP WDCQ WDCQ-DT2 WDCQ-DT3	16.2 16.3 12 12.2 12.3 18 18 18.2 18.3 36 15 15.2 15.3	I-M I-M N I-M I-M I-M I-M I-M I-M E E E-M E-M	FLINT, MI FLINT, MI FLINT, MI FLINT, MI FLINT, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI SAGINAW, MI BAD AXE, MI BAD AXE, MI				

		YSTEM:					SYSTEM I
nunication	s LTD						626
t every radio s	tation ca						Н
it is carried by monitoring, to prmation about rm. lentify the call tate whether the the radio stati this by placing sive the station	y the sys be recei t the Co sign of e he statio ion's sign g a checl n's locatio	tem whenever it is received at ved at the headend, with the s opyright Office regulations on th each station carried. on is AM or FM. nal was electronically processor k mark in the "S/D" column. on (the community to which th	the system's hear system's FM anten his point, see page ed by the cable s e station is licens	adend, and (2 nna, during ce ge (v) of the ge ystem as a se sed by the FCC) it can b ertain sta eneral in parate a	be expected, ated intervals. Instructions in the.	Primary Transmitters Radio
					S/D		
AIVI OF FM	5/D	LUCATION OF STATION	CALL SIGN	AIVI OF FM	5/D	LUCATION OF STATION	
·							
	NSMITTERS: t every radio s vhose signals tions Concel it is carried by monitoring, to ormation about m. lentify the call tate whether t the radio stat this by placing sive the station	whose signals were ge tions Concerning All it is carried by the sys- monitoring, to be recei- formation about the Co- rm. lentify the call sign of a tate whether the static the radio station's sign this by placing a check ive the station's locati- ladian stations, if any,	NSMITTERS: RADIO t every radio station carried on a separate and discre- whose signals were generally receivable by your cable stions Concerning All-Band FM Carriage: Under C it is carried by the system whenever it is received at monitoring, to be received at the headend, with the s formation about the Copyright Office regulations on the monitor about the Copyright Office regulations on the matter and the station of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processes this by placing a check mark in the "S/D" column. sive the station's location (the community to which the radian stations, if any, the community with which the	NSMITTERS: RADIO t every radio station carried on a separate and discrete basis and list whose signals were generally receivable by your cable system during ctions Concerning All-Band FM Carriage: Under Copyright Office re it is carried by the system whenever it is received at the system's he monitoring, to be received at the headend, with the system's FM ante ormation about the Copyright Office regulations on this point, see pager. The the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable s this by placing a check mark in the "S/D" column. Here the station is location (the community to which the station is license readian stations, if any, the community with which the station is identified	NSMITTERS: RADIO t every radio station carried on a separate and discrete basis and list those FM stat whose signals were generally receivable by your cable system during the accounting ctions Concerning All-Band FM Carriage: Under Copyright Office regulations, an it is carried by the system whenever it is received at the system's headend, and (2 monitoring, to be received at the headend, with the system's FM antenna, during ca ormation about the Copyright Office regulations on this point, see page (v) of the gr m. Hentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a see this by placing a check mark in the "S/D" column. Here station's location (the community to which the station is licensed by the FCC adian stations, if any, the community with which the station is identified).	NSMITTERS: RADIO t every radio station carried on a separate and discrete basis and list those FM stations car whose signals were generally receivable by your cable system during the accounting period ctions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM sign it is carried by the system whenever it is received at the system's headend, and (2) it can be monitoring, to be received at the headend, with the system's FM antenna, during certain stator ormation about the Copyright Office regulations on this point, see page (v) of the general in rm. Hentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a separate a this by placing a check mark in the "S/D" column. Here the station's location (the community to which the station is licensed by the FCC or, in t radian stations, if any, the community with which the station is identified).	NSMITTERS: RADIO t every radio station carried on a separate and discrete basis and list those FM stations carried on an whose signals were generally receivable by your cable system during the accounting period. ctions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. cormation about the Copyright Office regulations on this point, see page (v) of the general instructions in the. rm. lentify the call sign of each station carried. tate whether the station is AM or FM. the radio station's signal was electronically processed by the cable system as a separate and discrete this by placing a check mark in the "S/D" column. ive the station's location (the community to which the station is licensed by the FCC or, in the case of radian stations, if any, the community with which the station is identified).

Accounting Perio							FOR	M SA1-2E. PAGE 5.
Name	LEGAL NAME OF OWNER OF (Parish Communication		EM:					SYSTEM ID# 62652
Substitute	SUBSTITUTE CARRIAGE In General: In space I, identii substitute basis during the ac explanation of the programmi	fy every non counting pe	network televisi riod, under spe	<i>ion program,</i> broadcast by cific present and former FC	a <i>distant</i> statio C rules, regula	ations, or aut	horizations.	For a further
Carriage: Special Statement and Program Log	 SPECIAL STATEMENT During the accounting peribroadcast by a distant stat Note: If your answer is "No" log in block 2. LOG OF SUBSTITUTE In General: List each subst clear. If you need more space Column 1: Give the title period, was broadcast by a under certain FCC rules, rep Do not use general categori "NBA Basketball: 76ers vs. Column 2: If the program Column 3: Give the broad the case of Mexican or Can Column 5: Give the mon first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." 	CONCER iod, did you ion? ', leave the PROGRA itute progra ce, please a of every nou distant stati gulations, o res like "moo Bulls." n was broac sign of the s dcast static adian statio th and day 'e "5/7."	NING SUBST r cable system rest of this pag m on a separa add additional r nnetwork televi on and that you r authorizations vies" or "baske locast live, enter station broadca on's location (th ns, if any, the o when your syst substitute pro	ITUTE CARRIAGE carry, on a substitute bas ge blank. If your answer is te line. Use abbreviations ows to the tables. ision program ("substitute ur cable system substitute s. See page (v) of the gen ttball." List specific program r "Yes." Otherwise enter "I isting the substitute progra te community to which the community with which the tem carried the substitute gram was carried by your	"Yes," you mu "Yes," you mu wherever pos program") that d for the prog eral instructio n titles, for ex No." am. station is lice station is lice program. Use cable system	twork televis ust complete ssible, if their at, during the rramming of ns for furthe ample, "I Lo ensed by the ntified). e numerals, w	The program The p	n X NO m s tion n.
	Column 7: Enter the letter to delete under FCC rules a was substituted for program effect on October 19, 1976.	nd regulation in the second seco	ons in effect du	ring the accounting period s permitted to delete unde	l; enter the lef er FCC rules a	ter "P" if the	listed progr ons in TUTE	am 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 -	IMES - TO	DELETION
					· · · · · · · · · · · · · · · · · · ·		<u>-</u>	
							<u>-</u>	
							_	

Accounting Period:	2021/2	FORM SA	1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Parish Communications LTD	S	STEM ID# 62652
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a further explanation of how to compute this page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	smission service s amount, see	9,705.00 ss receipts)
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 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions located in the paper SA1-2 form for more information. 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 accounting period is \$52.00		
	Line 1. Royalty fee for accounting period		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 more than \$137	7,100)	
	1. Base amount under statutory formula \$ 263,800.00	0	
	2. Enter amount of gross receipts from space K \$ 139,705.00	<u>)</u>	
	3. Subtract line 2 from line 1	0	
	4. Enter the amount of gross receipts from space K	139,705.00	
	5. Enter the amount from line 3	124,095.00	
	6. Subtract line 5 from line 4	15,610.00	
	7. Multiply line 6 by .005 (enter figure here)		78.05
	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	\$	78.05
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$52	27,600)	
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)	1,319.00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6	···	
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	78.05	
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	\$	98.05
	EFT Trace # or TRANSACTION ID #		
	Important: Your remittance must be in the form of an electronic payment payable to the Regis See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for		

Accounting Period:	2021/2					FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF O Parish Commu	WNER OF CABLE SYSTEM: nications LTD				SYSTEM ID# 62652
M Channels	to its subscriber 1. Enter the tota	s, and (2) the cable system's I number of channels on whic	total num	els on which the cable system carried ber of activated channels during the	accounting period.	18
	on which the	l number of activated channe cable system carried televisic lcast services	on broadc			110
N Individual to Be Contacted		BE CONTACTED IF FURTI about this statement of accou		DRMATION IS NEEDED (Identify an	individual to whom	
for Further Information	Name	FLOYD GROCHOLS			Telephone	989-662-6811
	Address	803 W. MIDLAND RO (Number, street, rural route, apartu AUBURN, MI 48611 (City, town, state, zip)		ite number)		
	Email	FLOYDGROCH	IOLSKI@	QGMAIL.COM	Fax (optional	
ο	CERTIFICATION (This statement of account mi	ust be ce	tified and signed in accordance with	Copyright Office regulations)	
Certification		d, hereby certify that (Check or r other than corporation or p		<i>ly one</i> , of the boxes.) p) I am the owner of the cable system	as identified in line 1 of space	B; or
				artnership) I am the duly authorized a s not a corporation or partnership; or	gent of the owner of the cable	system as identified
		in line 1 of space B.		ation) or a partner (if a partnership) of		
		e, and correct to the best of m		ige, information, and belief, and are ma		
			Х	/s/ Floyd Grocholski		-
				electronic signature on the line above tr nature using an "/s/ signature" (e.g., /s,		
		Typed or printed	l name:	FLOYD GROCHOLSKI		
		Title: (Ti		RAL MANAGER		
		Date:			FEBRUARY 23, 2022	

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.

ounting Period: 2021/2	FORM SA1-2E. PAGE
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM II
rish Communications LTD	6265
 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? X 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.	0
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	<u>v</u>
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
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