

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

**STATEMENT OF ACCOUNT**  
 for Secondary Transmissions by  
 Cable Systems (Short Form)

General instructions are located  
 in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY	
DATE RECEIVED	AMOUNT
12/7/17	\$
	ALLOCATION NUMBER

Return completed  
 workbook by email to:

[coplcasa@ksc.gov](mailto:coplcasa@ksc.gov)

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

<b>A</b>	ACCOUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY)(Period))					
	<table border="1"> <tr> <td>2017/1</td> <td>Period 1 = January 1 - June 30</td> <td>Period 2 = July 1 - December 31</td> </tr> <tr> <td>2017/1</td> <td colspan="2">Barcode Data Filing Period (optional - see instructions)</td> </tr> </table>	2017/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	2017/1	Barcode Data Filing Period (optional - see instructions)
2017/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31				
2017/1	Barcode Data Filing Period (optional - see instructions)					
<b>Account Period</b>						
<b>B</b> Owner	<p>Instructions:</p> <p>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.</p> <p>List any other name or names under which the owner conducts the business of the cable system.</p> <p>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.</p> <p>Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.</p> <p>24931</p>					
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM					
	La Harpe Communications Inc.					
	BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)					
	MAILING ADDRESS OF OWNER OF CABLE SYSTEM					
	<p>P.O. Box 100  <small>(City, State, ZIP+4, apartment or suite number)</small>  <b>La Harpe, Kansas 66751</b>  <small>(City, State, ZIP+4)</small></p>					
<b>C</b> System	<p>INSTRUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless the names already appear in space 2. In line 2, give the mailing address of the system, if different from the address given in space 2.</p>					
	1 IDENTIFICATION OF CABLE SYSTEM:					
	2 MAILING ADDRESS OF CABLE SYSTEM:					
<p><b>Privacy Act Notice:</b> 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 administer 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. Throughout this form, you are asked to provide the PII requested in order to establish and maintain a public record which includes information on the Office's public indexes and in search results returned for the public. The effect of not providing the PII requested is that it may compromise the Office's ability to process 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.</p>						

Accounting Period: 2017/1

FORM SA1-2E, PAGE 1B.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	
<b>D</b>  <b>Area Served</b>	<b>La Harpe Communications Inc.</b>	
	INSTRUCTIONS: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city.	
<b>First Community</b>	<b>CITY OR TOWN</b>	<b>STATE</b>
	<b>La Harpe</b>	<b>Kansas</b>
Add Rows as Necessary	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----
	-----	-----

Accounting Period: 2017/1

FORM SA1-2E, PAGE 1B.

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:		SYSTEM ID#
<b>D</b>  <b>Area Served</b>	<b>La Harpe Communications Inc.</b>		
	<b>24931</b>		
Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.			
Note: Entities and properties such as hotels, apartments, condominiums, or mobile home parks should be reported in parentheses below the identified city.			
CITY OR TOWN		STATE	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	
-----		-----	

Accounting Period: 2017/1		FORM SA-3E PAGE 3																																																																					
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM	SYSTEM ID#																																																																					
	La Harpe Communications Inc.	24931																																																																					
<b>E</b> Secondary Transmission Service: Sub- scribers and Rates	<b>SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES</b> In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the transmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be). Number of Subscribers: Both blocks in space E call for the number of subscribers in the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category the number of owners or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service). Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. Example: "\$20/mo". Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment. Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. Note: Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who has sets for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional sets". Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 for example, sets of services that include one or more secondary transmissions, list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.																																																																						
	<table border="1"> <thead> <tr> <th rowspan="2">CATEGORY OF SERVICE</th> <th colspan="2">BLOCK 1</th> <th colspan="2">BLOCK 2</th> </tr> <tr> <th>NO OF SUBSCRIBERS</th> <th>RATE</th> <th>CATEGORY OF SERVICE</th> <th>NO OF SUBSCRIBERS</th> <th>RATE</th> </tr> </thead> <tbody> <tr> <td>Residential:</td> <td>124</td> <td>\$33.40</td> <td>RSD</td> <td>10</td> <td>19.95</td> </tr> <tr> <td>• Service to first set</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>• Service to additional sets</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>• FM radio (if separate rate)</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Motel, hotel</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Commercial</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Converter</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>• Residential</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>• Non-residential</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			CATEGORY OF SERVICE	BLOCK 1		BLOCK 2		NO OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO OF SUBSCRIBERS	RATE	Residential:	124	\$33.40	RSD	10	19.95	• Service to first set						• Service to additional sets						• FM radio (if separate rate)						Motel, hotel						Commercial						Converter						• Residential						• Non-residential									
CATEGORY OF SERVICE	BLOCK 1		BLOCK 2																																																																				
	NO OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO OF SUBSCRIBERS	RATE																																																																		
Residential:	124	\$33.40	RSD	10	19.95																																																																		
• Service to first set																																																																							
• Service to additional sets																																																																							
• FM radio (if separate rate)																																																																							
Motel, hotel																																																																							
Commercial																																																																							
Converter																																																																							
• Residential																																																																							
• Non-residential																																																																							
<b>F</b> Services Other Than Secondary Transmissions: Rates	<b>SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES</b> In General: Space F calls for rate (not subscriber) information with regard to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. 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.																																																																						
	<table border="1"> <thead> <tr> <th rowspan="2">CATEGORY OF SERVICE</th> <th colspan="2">BLOCK 1</th> <th colspan="2">BLOCK 2</th> </tr> <tr> <th>CATEGORY OF SERVICE</th> <th>RATE</th> <th>CATEGORY OF SERVICE</th> <th>RATE</th> </tr> </thead> <tbody> <tr> <td>Continuing Services:</td> <td>Installation: Non-residential</td> <td></td> <td></td> <td></td> </tr> <tr> <td>• Pay cable</td> <td>• Motel, hotel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>• Pay cable—add'l channel</td> <td>• Commercial</td> <td></td> <td></td> <td></td> </tr> <tr> <td>• Fire protection</td> <td>• Pay cable</td> <td></td> <td></td> <td></td> </tr> <tr> <td>• Burglar protection</td> <td>• Pay cable—add'l channel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Installation: Residential</td> <td>• Fire protection</td> <td></td> <td></td> <td></td> </tr> <tr> <td>• First set</td> <td>• Burglar protection</td> <td>\$15.00</td> <td></td> <td></td> </tr> <tr> <td>• Additional sets</td> <td>Other services:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>• FM radio (if separate rate)</td> <td>• Reconnect</td> <td>\$15.00</td> <td></td> <td></td> </tr> <tr> <td>• Converter</td> <td>• Disconnect</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>• Outlet relocation</td> <td>\$30.00</td> <td></td> <td></td> </tr> <tr> <td></td> <td>• Move to new address</td> <td>\$15.00</td> <td></td> <td></td> </tr> </tbody> </table>			CATEGORY OF SERVICE	BLOCK 1		BLOCK 2		CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	Continuing Services:	Installation: Non-residential				• Pay cable	• Motel, hotel				• Pay cable—add'l channel	• Commercial				• Fire protection	• Pay cable				• Burglar protection	• Pay cable—add'l channel				Installation: Residential	• Fire protection				• First set	• Burglar protection	\$15.00			• Additional sets	Other services:				• FM radio (if separate rate)	• Reconnect	\$15.00			• Converter	• Disconnect					• Outlet relocation	\$30.00				• Move to new address	\$15.00	
CATEGORY OF SERVICE	BLOCK 1		BLOCK 2																																																																				
	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE																																																																			
Continuing Services:	Installation: Non-residential																																																																						
• Pay cable	• Motel, hotel																																																																						
• Pay cable—add'l channel	• Commercial																																																																						
• Fire protection	• Pay cable																																																																						
• Burglar protection	• Pay cable—add'l channel																																																																						
Installation: Residential	• Fire protection																																																																						
• First set	• Burglar protection	\$15.00																																																																					
• Additional sets	Other services:																																																																						
• FM radio (if separate rate)	• Reconnect	\$15.00																																																																					
• Converter	• Disconnect																																																																						
	• Outlet relocation	\$30.00																																																																					
	• Move to new address	\$15.00																																																																					


Name	LEGAL NAME OF OWNER OF CABLE SYSTEM			SYSTEM ID#
	La Harpe Communications Inc.			24931
<b>G</b>  <b>Primary Transmitters: Television</b>	<b>PRIMARY TRANSMITTERS: TELEVISION</b>			
	<p><b>In General:</b> In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs (Sections 76.59d(i)(2) and (4), 76.611a(i)(2) and (4), or 76.83 inferno to 76.611a(i)(2) and (4)); and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.</p> <p><b>Substitute Basis Stations:</b> With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:</p> <ul style="list-style-type: none"> <li>Do not 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.</li> <li>List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page 60 of the general instructions.</li> </ul> <p><b>Column 1:</b> List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multichannel system associated with a station according to its over-the-air designation. For example, report multichannel "WETA-2" as the same on the form.</p> <p><b>Column 2:</b> Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C.</p> <p><b>Column 3:</b> Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "NAM" (for network multichannel), "I" (for independent), "AM" (for independent multichannel), "E" (for noncommercial educational), or "EAM" (for noncommercial educational multichannel). For the meaning of these terms, see page 60 of the general instructions in the paper SA1-Z form.</p> <p><b>Column 4:</b> Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.</p>			
All Other Stations (Network)	1. CALL SIGN	2. BROADCAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KRFX	4	N	Pittsburg, Kansas
	KSNF	5	N	Pittsburg, Kansas
	KOAM	7	N	Pittsburg, Kansas
	KODE	12	N	Joplin, Missouri
	KTWU	48	E	Topeka, Kansas
	KTWU	49	E	Topeka, Kansas
KTWU	50	E	Topeka, Kansas	





Accounting Period: 2017/1		FORM 5471 - PAGE 4
Name Lia Noyes Communications, Inc.		SYSTEM ID# 24831
<b>K</b> Gross Receipts	<b>GROSS RECEIPTS</b> Instructions: The form on which in this space determines the form you file and the amount you owe. Enter the total of all payments received, including any amounts for the copyright, reproduction, or other fees identified in space D) during the accounting period. For a further explanation of how to compute this amount, see item 1(a) of the general instructions included in the cover S-11 form. Gross receipts from distributors for non-reproducible works are not included during the accounting period. <b>IMPORTANT:</b> You must complete a statement in space F concerning gross receipts.	<b>\$30,947.42</b>
	<b>L</b> Copyright Royalty Fee	<p><b>COPYRIGHT ROYALTY FEE</b> Instructions: To compute the royalty fee you owe:</p> <ul style="list-style-type: none"> <li>• Complete block 1 (line 2) or block 3.</li> <li>• Use block 1 if the amount of gross receipts in space K is \$107,100 or less.</li> <li>• Use block 2 if the amount of gross receipts in space K is more than \$107,100 but less than or equal to \$203,800.</li> <li>• Use block 3 if the amount of gross receipts in space K is more than \$203,800 but less than \$277,600.</li> </ul> <p>See cover (a) of the general instructions for details in items 1(a), 7, 8, and 9 of the instructions.</p> <p style="text-align: center;"><b>BLOCK 1: GROSS RECEIPTS OF \$107,100 OR LESS</b></p> <p>Instructions: As a catch-all item with gross receipts of \$107,100 or less, the royalty fee that you must pay for this six-month accounting period is \$21.00.</p> <p>Line 1: Royalty fee for accounting period ..... <b>\$ 21.00</b></p> <p>Line 2: Interest charge. Enter the amount from line 4, space C, page 8 ..... <b>0.00</b></p> <p>Line 3: <b>TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD.</b> Add lines 1 and 2 ..... <b>\$ 21.00</b></p> <p style="text-align: center;"><b>BLOCK 2: GROSS RECEIPTS OF MORE THAN \$107,100 BUT LESS THAN \$203,800</b></p> <p>1. Base amount under statutory formula ..... <b>\$ 263,800.00</b></p> <p>2. Enter amount of gross receipts from space K _____</p> <p>3. Subtract line 2 from line 1 ..... _____</p> <p>4. Enter the amount of gross receipts from space K _____</p> <p>5. Enter the amount from line 3 ..... _____</p> <p>6. Subtract line 5 from line 4 ..... _____</p> <p>7. Multiply line 6 by .005 (enter figure here) ..... _____</p> <p>8. Interest charge. Enter the amount from line 4, space C, page 8 ..... <b>0.00</b></p> <p>9. <b>TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD.</b> Add lines 7 and 8 ..... _____</p> <p style="text-align: center;"><b>BLOCK 3: GROSS RECEIPTS OF MORE THAN \$203,800 BUT LESS THAN \$277,600</b></p> <p>1. Enter the amount of gross receipts from space K _____</p> <p>2. Base amount under statutory formula ..... <b>\$ 263,800.00</b></p> <p>3. Subtract line 2 from line 1 ..... _____</p> <p>4. Multiply line 3 by 0% ..... _____</p> <p>5. Multiply the on the line 4 (\$203,800) of gross receipts (under statutory formula) ..... <b>\$ 1,319.00</b></p> <p>6. Interest charge. Enter the amount from line 4, space C, page 8 ..... <b>0.00</b></p> <p>7. <b>TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD.</b> Add lines 4, 5, and 6 ..... _____</p> <p style="text-align: center;"><b>FILING FEE AND TOTAL REMITTANCE DUE</b></p> <p>Filing Fee and Total Remittance Due</p> <p>1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3 above) ..... <b>\$ 21.00</b></p> <p>2. Filing Fee (See the instructions for more information on how to calculate it) ..... <b>\$ 15.00</b></p> <p>3. <b>TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD.</b> Add lines 1 and 2 ..... <b>\$ 36.00</b></p> <p><b>Important:</b> Your remittance must be in the form of an electronic payment payable to the Registrar of Copyright. See page 1 of the general instructions in the paper S-11 form for more information.</p>



Name	LEGAL NAME OF OWNER OF CABLE SYSTEM	SYSTEM ID#
	La Harpe Communications Inc.	24981
<b>M</b> Channels	<p><b>CHANNELS</b></p> <p><b>Instructions:</b> 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.</p> <p>1. Enter the total number of channels on which the cable system carried television broadcast stations ..... <input type="text" value="7"/></p> <p>2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services ..... <input type="text" value="57"/></p>	
<b>N</b> Individual to be Contacted for Further Information	<p><b>INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED</b> (Identify an individual to whom we can contact about this statement of account.)</p> <p>Name: <u>Harry Lee, Jr.</u> Telephone: <u>620-496-2291</u></p> <p>Address: <u>109 West 6th Street</u> <small>(Provide street, apt. no., apt. no., apartment, or suite number)</small></p> <p><u>La Harpe, Kansas 66751</u> <small>(City, state, and zip)</small></p> <p>Email: <u>hlee@lscable.com</u> Fax to: <u>716/664-6161</u></p>	
<b>O</b> Certification	<p><b>CERTIFICATION</b> (This statement of account must be certified and signed in accordance with Copyright Office regulations)</p> <p>• I, the undersigned, hereby certify that (Check one, but not one of the boxes.)</p> <p><input type="checkbox"/> (Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B or</p> <p><input type="checkbox"/> (Agent of owner other than corporation or partnership) I am the authorized agent of the owner of the cable system as identified in line 1 of space B and that the owner is not a corporation or partnership; or</p> <p><input type="checkbox"/> (Officer or partner) I am an officer (if a corporation) or a partner (if a partnership) of the legal entity identified as owner of the cable system in line 1 of space B.</p> <p>• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, correct, and true to the best of my knowledge, information, and belief, and are made in good faith.</p> <p>[18 U.S.C. Section 1001 (5)(B)]</p> <p style="text-align: center;"><b>X</b></p> <p> Enter an electronic signature on the line above to certify this statement. Enter signature using an "A" signature" (e.g., /J John Smith)</p> <p>Typed or printed name: <u>Harry Lee, Jr.</u></p> <p>Title: <u>CEO/Manager</u></p> <p>Date: <u>05/03/2017</u></p>	

**Privacy Act Notice:** Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the non-ownership identification information (PI) requested on this form in order to facilitate the assessment of accuracy. PI is non-personal information that can be used to identify or track an individual, such as name, address and telephone numbers. The Privacy Act was enacted in the exclusive case of a certificate and provides a right to request which includes the removal of the PI from the public domain and to search records prepared for the public. The Office of the Copyright Office will ensure that the PI is removed from the public domain and to search records in the completed record of statements of account, and it will ensure the legal sufficiency of the filing, a determination that would be made by a court of law.

<b>Accounting Period: 2017/1</b>	FORM SA1-2E, PAGE 6								
<b>LEGAL NAME OF OWNER OF CABLE SYSTEM</b> <b>La Harge Communications Inc.</b>	<b>SYSTEM ID#</b> <b>24931</b>								
<p><b>SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS</b></p> <p>The Satellite Home Viewer Act of 1988 amended Title 17, section 1116(b)(3)(A), of the Copyright Act by adding the following sentence:</p> <p style="padding-left: 20px;">"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 transmissions, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119."</p> <p>For more information on when to exclude these amounts, see the note on page (vi) of the general instructions located in the paper SA1-2 form.</p> <p><input checked="" type="checkbox"/> 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?</p> <p style="padding-left: 20px;">NO</p> <p>YES. Enter the total here and list the satellite carrier(s) below: <span style="float: right;">\$ _____</span></p>									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Name: _____</td> <td style="width: 50%; padding: 2px;">Name: _____</td> </tr> <tr> <td style="width: 50%; padding: 2px;">Mailing Address: _____</td> <td style="width: 50%; padding: 2px;">Mailing Address: _____</td> </tr> <tr> <td style="width: 50%; padding: 2px;">_____</td> <td style="width: 50%; padding: 2px;">_____</td> </tr> <tr> <td style="width: 50%; padding: 2px;">_____</td> <td style="width: 50%; padding: 2px;">_____</td> </tr> </table>		Name: _____	Name: _____	Mailing Address: _____	Mailing Address: _____	_____	_____	_____	_____
Name: _____	Name: _____								
Mailing Address: _____	Mailing Address: _____								
_____	_____								
_____	_____								
<p><b>INTEREST ASSESSMENT</b></p> <p>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.</p> <p>Line 1 Enter the amount of late payment or underpayment: <span style="float: right;">_____</span></p> <p>Line 2 Multiply line 1 by the interest rate* and enter the sum here: <span style="float: right;">x _____ = _____</span></p> <p>Line 3 Multiply line 2 by the number of days late and enter the sum here: <span style="float: right;">x _____ days = _____</span></p> <p>Line 4 Multiply line 3 by 0.00274** and enter here: <span style="float: right;">x 0.00274 = _____</span></p> <p>Line 5 Multiply line 4 by block 1, line 2, or block 2 line 8, or block 3 line 6: <span style="float: right;">\$ _____ (interest charge) = _____</span></p> <p>* To view the interest rate chart click on <a href="http://www.copyright.gov/licensing/interest-rate.pdf">www.copyright.gov/licensing/interest-rate.pdf</a>. For further assistance please contact the Licensing Division at (202) 707-8150 or <a href="mailto:licensing@loc.gov">licensing@loc.gov</a>.</p> <p>** This is the decimal equivalent of 0.065, which is the interest assessment for one day late.</p> <p>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 shown in the original filing.</p> <p>Owner: _____</p> <p>Address: _____</p> <p>ID number: _____</p> <p>First community served: _____</p> <p>Accounting period: _____</p>									
<p><b>Privacy Act Notice:</b> 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 releases and in search records accessible to the public. The effect of providing the PII requested in Part I is the data 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.</p>									

**P**

**Special Statement  
Concerning Gross  
Receipts Exclusion**

**Q**

**Interest Assessment**