THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2015

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2 Short Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are at the end of this form [pages (i)-(vii)].

FOR COPYRIGH	HT OFFICE USE ONLY
DATE RECEIVED	AMOUNT
2/5/2021	\$ ALLOCATION NUMBER

Return to: Library of Congress Copyright Office-LD 101 Independence Avenue SE Washington, DC 20557-6400 (202) 707-8150

For courier deliveries, see page ii of the general instructions.

	1									
A	ACC	COUNTING PERIOD COVERED	BY THIS STATEME	T: (Check one of the boxes and fill	in the year date.)					
Accounting	Πì	anuary 1-June 30	■ July 1–December 31 2020	. 4 . ;						
Period		(Year)								
B Owner	INSTRUCTIONS: Give the full legal name of the owner of the cable system in line 1. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation. In line 2, list any other 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. 63393 LEGAL NAME OF OWNER OF CABLE SYSTEM: VERNEAU NETWORKS, INC. 63393 BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT):									
					:					
	3	MAILING ADDRESS OF OWNER 121 MILL STREET PO BOX (Number, street, rural route, apartment, or sur HILLSBORO, WI 54634-042 (City, town, state, zip)	(427							
	Inst	nictions: In line 1, give any busines	s or trade names used	to identify the business and operation of t	the system unless these					
C	nam	es already appear in space B. In line	2, give the mailing addr	ess of the system, if different from the add	ress given in space B.					
System	1	IDENTIFICATION OF CABLE SY	STEM:							
		MAILING ADDRESS OF CABLES	SYSTEM:							
	2 (Number, street, rural route, apartment, or suite number) (City, town; state, zip)									
D Area Served	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	CITY OR TOWN	STATE					
First ▶ Community	MOI	HILLSBORO WI JUNEAU WI MONROE WI SAUK WI VERNON WI								

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 filing, a determination that would be made by a court of law.

LEGAL NAME OF OWNER OF CABLE SYSTEM:						
VERNEAU NETWORKS, INC.			63393	Name		
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.E.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 fillings. 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	CITY OR TOWN	STATE			
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************************				◆ First Community		
				Committee		
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LEGAL NAME OF OWNER OF CABLE SYSTEM:

VERNEAU NETWORKS, INC.

63393

E

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission 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 to 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 persons 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/mth"). 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 pays extra 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 set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1, (for example, tiers 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.

BLOCK	. 1	BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential: Service to first set Service to additional set(s)	241 251	\$58.99 \$7.00	BAŞIC PREMIUM		\$58.99 \$74.99
FM radio (if separate rate) Motel, hotel		- 1 + - • • • • •	PREMIUM PLUS	210	\$106.79
Commercial	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Converter Residential	i		**************************************		
Nonresidential					- 4 4 - 4 - 4

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect 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.

	BLOCK 1			BLOCK 2	
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
∗ Pay cable		Motel, hotel			,,,,,,,,
Pay cable-add'l channel	-4-5143	Commercial			
Fire protection	167111	Pay cable			
Burglar protection		Pay cable-add't channel			, ,
Installation: Residential		Fire protection	,		.,,,,,,,,
First set		Burglar protection			
Additional set(s)		Other Services:			
FM radio (if separate rate)		Reconnect			
Converter	,	Disconnect			
***		Outlet relocation			
TO THE PERSON AND THE		Move to new address			

LEGAL NAME OF OWNER OF CABLE SYSTEM:	Nam
VERNEAU NETWORKS, INC. 63393	

PRIMARY TRANSMITTERS: TELEVISION

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, 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 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement Program Log)—if the station
 was carried only on a substitute basis.
- 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 (v) of the general instructions.

Column 1: List each station's call sign. Do not 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 multicast stream "WETA-2" as the same on the form. Simulcast stations must be reported in column 1 (list each station separately; for example, WETA-2-simulcast).

Column 2: 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.

Column 3: 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), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions.

Column 4: 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.

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WISC	3	N	MADISON, WI
WKBT	8	N	LACROSSE, WI
WEAU	13	N	EAU CLAIRE, WI
WMTV	15	N	MADISON, WI
WXOW	19	N	LACROSSE, WI
WHA	21	E	MADISON, WI
KQEG	23	##	LACRESCENT, MN
WLAX	25	N	LACROSSE, WI
WKOW	27	N	MADISON, WI
W43BR	43	I	BÁRÁBGO, WI

G

Primary Transmitters: Television

				A	***************************************			FURIVI SA 1-2, PAGE
Name	LEGAL NAME OF C							63393
Primary Transmitters: Radio	Special Instruction and the basis of notes in the basis of the basis	List every ranks whose significations Co. (1) It is carried monitoring, to mation about the identify the State whether this by playing the state this by playing the state the state state state.	dio stanals we need to be real to the to call siner the station acting attention's	S: RADIO ition carried on a separate a ere generally receivable by y ing All-Band FM Carriage: Use system whenever it is received at the headend, with the Copyright Office regulation of each station carried. It is signal was electronically a check mark in the "S/D" control in the system in the "S/D" control in the system in the	our cable syst Inder Copyright Inder Copyright Inder Copyright Inder Copyrigh Inder Copyr	em during that Office regulem's header of antenna, dint, see page the cable system ion is licens	ilation id; an uring ((iv) o stem	counting period. is, an FM signal is generally id (2) it can be expected, on certain stated intervals. For fithe general instructions. as a separate and discrete
	ČALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
	Pad water to make the							
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ORM SA1-2, PAGE 5.								
LEGAL NAME OF OWNER OF CABLE SYST VERNEAU NETWORKS, I					63393		Name	
SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions. 1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE								
 During the accounting periodicast by a distant stat Note: If your answer is "No," log in block 2. 	od, did your ion?	cable system	carry, on a substitute ba	∏ Ye	s 🔳 No	` -	Statement and Program Log	
2. LOG OF SUBSTITUTE PF In General: List each substitute clear. If you need more space Column 1: Give the title of period, was broadcast by a dis under certain FCC rules, regulation of the certain of the certain first rules, for May 7, give Column 6: State the times to the nearest five minutes. Exemple:	ute program , please atta every nonnestant station lations, or a s like "movie ulls." was broadca in of the station's dian stations and day whe e "5/7." when the su	ich additional etwork televisi and that your outhorizations. es" or "basketlest live, enter "tion broadcasts location (the if any, the coen your system	pages. on program ("substitute cable system substitute See page (v) of the gen call." List specific progr Yes.". Otherwise, enter ing the substitute progr community to which the n carried the substitute am was carried by your	e program" d for the program titles, f "No." ram. ne station is program. L cable syst) that, during the ogramming of ano ctions for further in or example, "I Low s licensed by the identified). Use numerals, with times	accounting ther station of the Lucy" or FCC or, in the month		
as "6:00–6:30 p.m." Column 7: Enter the letter to delete under FCC rules and was substituted for programm on October 19, 1976.	"R" if the list regulations	ed program win effect during	as substituted for progr the accounting period	amming the enter the lider FCC rule	at your system w etter "P" if the liste lles and regulatio	as required ed program		
SL	BSTITUTE F	PROGRAM			I SUBSTITUTE GE OCCURRED	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: TIMES FROM — TO	DELETION		
					-	A		
					, 			
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		······································						

	447							

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: VERNEAU NETWORKS, INC.	63393
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount y all amounts (gross receipts) paid to your cable system by subscribers for the system's second (as identified in space E) during the accounting period. For a further explanation of how to copage (vi) of the general instructions. 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.	lary transmission service
Copyright Royalty Fee	COPYRIGHT ROYALTY AND FILING FEES Instructons: 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 Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than See page (vi) of the general instructions for more information.	or equal to \$263,800 \$527,600
	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 pa accounting period is \$52.00 Line 1. Royalty fee for accounting period Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	\$ 52.00 \$
	Line 3. Filling Fee	\$ 15.00
	Line 4, TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add lines 1, 2 and 3	\$ 67.00
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)
	1. Base amount under statutory formula \$263,800 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 9. Filling Fee 10. TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add lines 7, 8 and 9	\$ \$ \$ 20.00
		AND ADDRESS OF THE PARTY OF THE
	1. Enter the amount of gross receipts from space K 2. Base amount under statutory formula \$263,800 3. Subtract line 2 from line 1 \$ 4. Multiply line 3 by .01 \$ 5	'
		1,319
The state of the s	6. Interest Charge. Enter the amount from line 4, space Q, page 8	
		20.00
TOTAL PARTY OF THE	8. TOTAL ROYALTY AND FILING FEES PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, 6 and 7	\$
de la company	IMPORTANT: Your remittance must be in the form of an electronic payment payable to Register of Congeneral instructions for more information.	pyrights. See page I of the

FORM SA1-2.	PAGE 7
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LEGAL NAME OF OWNER OF CABLE SYSTEM: VERNEAU NETWORKS, INC. 63393	Name
CHANNELS Instructions: You must give (1) the number of channels on which the cable system carried television broadcast stations to its subscribers, and (2) the cable system's total number of activated channels during the accounting period. 1. Enter the total number of channels on which the cable system carried television broadcast stations. 2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services. 158	M Channels
INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual we can contact about this statement of account.) Name DONALD J HAMMER Telephone 608-489-3230 (Area code) Address 121 MILL STREET PO BOX 427 (Number, street, rural route, apartment, or suite number) HILLSBORO, WI 54634-0427 (City, town, state, zip) Email (optional) DJHAMMER@HILLSBOROTEL.COM Fax (optional) 608-489-1111	N Individual to Be Contacted for Further Information
CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations, as explained in the general instructions.) I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) [Qowner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space B; or [Agent of owner other than corporation or partnership) I am the duty 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 [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. I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [See 18 U.S.C. sec.1001] Handwritten signature: [Title: PRESIDENT] [Title: PRESIDENT] [Title: official position held in corporation or partnership) Date: 2/15/2021	Certification

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		FUNITY SATE, FAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: VERNEAU NETWORKS, INC.	63393
Special Statement Concerning Gross Receipts Exclusions	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 (vi) of the general instructions. 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:	
	Name Mailing address	->->-
Q Interest Assessment	INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpaym For an explanation of interest assessment, see page (vi) of the general instructions.	
	Line:2. Multiply line:1 by the interest rate* and enter the sun	x% here.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Line 3. Multiply line 2 by the number of days late and enter	·
	Line 4, Multiply line 3 by .00274** and enter here and in spa line 2, or block 2, line 8, or block 3, line 6	ce L (page 6) block 1, (interest charge)
	*To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov.	
	**This is the decimal equivalent of 1/365, which is the interest assessment for one day late. Note: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please.	
	Owner Address	arber, and accounting period as given in the original filing.
	ID number First community served	

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