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 COPYRIGH	HT OFFICE USE ONLY	Return completed workbook by email to:
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@loc.gov</u>
General instructions are located in the first tab of this workbook	08/24/2023	S ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
A ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT: (YY	/YY/(Period))	

		2023/1     Period 1 = January 1 - June 30     Period 2 = July 1 - December 31	
		20231 Barcode Data Filing Period (optional - see instructions)	
Accounting			
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.	
			3502
		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	
		Fidelity Cablevision, LLC	
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)	
		CoBridge Broadband, LLC dba Fidelity Communications	
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM	
		64 N Clark	
		(Number, street, rural route, apartment, or suite number)	
		Sullivan, MO 63080 (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 u s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in	
System		IDENTIFICATION OF CABLE SYSTEM:	•
.,	1		
		MAILING ADDRESS OF CABLE SYSTEM:	
	2	(Number, street, rural route, apartment, or suite number)	
	1	(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#
	Fidelity Cablevision, LLC	3502
D	Instructions: List each separate community served by the cable system. A "com "a separate and distinct community or municipal entity (including unincorporate discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that y as the "first community." Please use it as the first community on all future filing Note: Entities and properties such as hotels, apartments, condominiums, or mol	ed communities within unincorporated areas and including single, ou list will serve as a form of system identification hereafter known s.
Area Served	identified city.	
	CITY OR TOWN	STATE
First	New Roads	LA
Community	Pointe Coupee	LA
	Morganza	LA
dd Rows as Necessary		

	LEGAL NAME OF OWNER OF CA								-2E. PAGE
Name								313	350
	Fidelity Cablevision, LL								
Е	SECONDARY TRANSMISSION			-	-				
	In General: The information in sp			-	•				
Secondary	system, that is, the retransmissio about other services (including pa								
Transmission	last day of the accounting period								
Service: Sub-	Number of Subscribers: Both						e system, b	roken	
scribers and	down by categories of secondary			•	•				
Rates	each category by counting the nu	•		0,0		•		harged	
	separately for the particular service Rate: Give the standard rate ch							and the	
	unit in which it is generally billed.	-	-				-		
	category, but do not include disco	ounts allowed f	or adva	nce payment.	-				
	Block 1: In the left-hand block								
	systems most commonly provide that applies to your system. <b>Note</b>								
	categories, that person or entity s								
	subscriber who pays extra for cal					0,	•		
	first set" and would be counted or								
	Block 2: If your cable system h								
	printed in block 1 (for example, tie with the number of subscribers a								
	sufficient.		ngnen						
	BLC	DCK 1	•				BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CAT	EGORY OF SEI	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential:								
	<ul> <li>Service to first set</li> </ul>		902	59.56					
	<ul> <li>Service to additional set(s)</li> </ul>								
	<ul> <li>FM radio (if separate rate)</li> </ul>								
	Motel, hotel		5	18.00					
	Commercial		3	13.50					
	Converter								
	• Residential								
	Non-residential								
							•		
_	SERVICES OTHER THAN SECO In General: Space F calls for rate					vour cable syste	m's service	es that were	
F	not covered in space E, that is, th								
	service for a single fee. There are	•			0		<b>U</b> ( )		
Services Other Than	furnished at cost or (2) services of								
Secondary	amount of the charge and the uni enter only the letters "PP" in the r		usualiy	billed. If any fat	es ale cha	rgeu on a variar	ne per-prog	Tam Dasis,	
Fransmissions:	Block 1: Give the standard rate		ne cable	e system for eac	ch of the ap	plicable service	s listed.		
Rates	Block 2: List any services that				-				
	listed in block 1 and for which a s				hed. List th	lese other servio	ces in the fo	orm of a	
	brief (two- or three-word) descrip			le for each.			1		
		BLO						BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE		GORY OF SER ation: Non-res		RATE	CATEGO	DRY OF SERVICE	RATE
	Pay cable	PP		otel, hotel	iuentiai	\$80/hr	Tier		67.7
	• Pay cable—add'l channel	FF		mmercial		\$80/hr	Tier		17.2
	Fire protection			y cable		ψ <b>υ</b> σ/Π	Digital I	Basic	12.0
	•Burglar protection			y cable-add'l ch	annel		Digital		7.9
	Installation: Residential			e protection			Signal		1.5
	• First set	\$80/hr		rglar protection					
	Additional set(s)	φ <b>ο</b> σ/π		services:					
	• FM radio (if separate rate)			connect		\$25			
	Converter			sconnect		¥20			
				tlet relocation					
			• IV/IC	ove to new addr	ess				

				FORM SA	
Name	LEGAL NAME OF OWNER O			SY	STEM I
	Fidelity Cablevision,				35
_	PRIMARY TRANSMITTERS:				_
G Primary ransmitters: Television	In General: In space G, id carried by your cable syste FCC rules and regulations 76.59(d)(2) and (4), 76.61( substitute program basis, a Substitute Basis Stations basis under specific FCC r • Do <i>not</i> list the station here station was carried <i>only</i> or • List the station here, and basis. For further informati Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chanr of license. For example, V Column 3: Indicate in eaci educational station, by ent (for independent multicast) For the meaning of these t	lentify every television station (including the accounting period, except is in effect on June 24, 1981, permitting th (e)(2) and (4), or 76.63 (referring to 76.63 exception in the next paragraph. <b>s:</b> With respect to any distant stations carrules, regulations, or authorizations: re in space $G$ —but do list it in space I (then a substitute basis. also in space I, if the station was carried ion concerning substitute basis stations, on's call sign. <i>Do not</i> report origination per dwith a station according to its over-the	(1) stations carried only on a part e carriage of certain network prog 1(e)(2) and (4))]; and (2) certain st rried by your cable system on a su e Special Statement and Program I both on a substitute basis and als see page (v) of the general instruc- rogram services such as HBO, ES -air designation. For example, rep vision station for broadcasting ove station, an independent station, or for network multicast), "I" (for indep r "E-M" (for noncommercial educa ctions in the paper SA1-2 form.	-time basis under rams [sections ations carried on a ubstitute program h Log)—if the so on some other ctions. SPN, etc. Identify each bort multistream r the air in its community a noncommercial pendent), "I-M" tional multicast).	
	FCC. For Mexican or Cana	adian stations, if any, give the name of th	e community with which the statio	n is identified.	••
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATIC	ON
	WAFB	9	N 	BATON ROUGE, LA	
	WAFB-DT3	9.3	I-M	BATON ROUGE, LA	
	WBXH	32	<b>I</b>	BATON ROUGE, LA	
lows as Necessary	WBRL	20	<b> </b>	BATON ROUGE, LA	
ows as Necessary	WBRL WBRZ	20 13		BATON ROUGE, LA BATON ROUGE, LA	
Rows as Necessary					
ows as Necessary	WBRZ	13	N	BATON ROUGE, LA	
Rows as Necessary	WBRZ WBRZ-DT2	13 13.2	N I-M	BATON ROUGE, LA BATON ROUGE, LA	
Rows as Necessary	WBRZ WBRZ-DT2 KBTR-DT3 WGMB	13 13.2 36.3	N I-M	BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA	
Rows as Necessary	WBRZ WBRZ-DT2 KBTR-DT3	13 13.2 36.3 24	N I-M I-M I	BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA	
Rows as Necessary	WBRZ WBRZ-DT2 KBTR-DT3 WGMB WGMB-DT3	13 13.2 36.3 24 24.3	N I-M I I I-M	BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA	
Rows as Necessary	WBRZ WBRZ-DT2 KBTR-DT3 WGMB WGMB-DT3 WLPB-TV	13 13.2 36.3 24 24.3 25	N I-M I I I-M	BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA	
Rows as Necessary	WBRZ WBRZ-DT2 KBTR-DT3 WGMB WGMB-DT3 WLPB-TV	13 13.2 36.3 24 24.3 25	N I-M I I I-M	BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA	
Rows as Necessary	WBRZ WBRZ-DT2 KBTR-DT3 WGMB WGMB-DT3 WLPB-TV	13 13.2 36.3 24 24.3 25	N I-M I I I-M	BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA	
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I Rows as Necessary	WBRZ WBRZ-DT2 KBTR-DT3 WGMB WGMB-DT3 WLPB-TV	13 13.2 36.3 24 24.3 25	N I-M I I I-M	BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA	
I Rows as Necessary	WBRZ WBRZ-DT2 KBTR-DT3 WGMB WGMB-DT3 WLPB-TV	13 13.2 36.3 24 24.3 25	N I-M I I I-M	BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA BATON ROUGE, LA	

EGAL NAME OF			STEM.					SYSTEM II 35
	t every radio s	station ca	arried on a separate and discr nerally receivable by your cab					Н
ecceivable if (1) on the basis of For detailed info paper SA1-2 fo Column 1: lo Column 2: S Column 3: li signal, indicate Column 4: C	) it is carried by monitoring, to ormation about rm. dentify the call State whether if f the radio stat this by placing Give the station	y the sys be recein at the Co sign of e the static ion's sign g a check n's locati	I-Band FM Carriage: Under ( stem whenever it is received a ved at the headend, with the opyright Office regulations on the each station carried. on is AM or FM. nal was electronically process k mark in the "S/D" column. on (the community to which the the community with which the	t the system's he system's FM ante this point, see pa sed by the cable s ne station is licen	adend, and (2 enna, during o ge (v) of the g system as a se sed by the FC	2) it can ærtain s general i eparate	be expected, tated intervals. nstructions in the. and discrete	Primary Transmitters Radio
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
				F			·····	

Accounting Perio	od: 2023/1						FOF	RM SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	TEM:					SYSTEM ID#
Name	Fidelity Cablevision, L	LC						3502
	SUBSTITUTE CARRIAG				00			
	In General: In space I, ident					on that you	cable evet	am carried on a
•	substitute basis during the a							
Substitute	explanation of the programm							
Carriage:	1. SPECIAL STATEMEN	T CONCER	NING SUBST	TITUTE CARRIAGE				
Special	<ul> <li>During the accounting per</li> </ul>				sis, any nonnet	work televis	ion prograr	n
Statement and	broadcast by a distant sta	-	,				YES	XNO
Program Log	,				«>/ "			
	Note: If your answer is "No	", leave the	rest of this pag	je blank. If your answer is	"Yes," you mu	st complete	the progra	m
	log in block 2.							
	2. LOG OF SUBSTITUTE			ta lina. I lao abbraviationa	wherever	sible if their	mooning	
	In General: List each subst clear. If you need more spa				wherever pos	sidle, if their	meaning is	5
				ision program ("substitute	program") that	t, during the	accounting	a
	period, was broadcast by a	distant stati	ion and that yo	ur cable system substitute	ed for the prog	ramming of	another sta	ition
	under certain FCC rules, re							
	Do not use general categor		vies" or "baske	tball." List specific prograr	m titles, for exa	ample, "I Lov	/e Lucy" or	
	"NBA Basketball: 76ers vs.		least live onto	r "Yes." Otherwise enter "I	No."			
	Column 3: Give the call	sign of the s	station broadca	isting the substitute progra	am			
				ne community to which the		nsed by the	FCC or, in	
	the case of Mexican or Can							
			when your sys	tem carried the substitute	program. Use	numerals, v	vith the mo	nth
	first. Example: for May 7 giv				ashla sustana	1 :		
	to the nearest five minutes.			gram was carried by your				ery
	stated as "6:00–6:30 p.m."	Example. a	i program came	eu by a system nom 0.01.	. 15 p.m. to 0.26	5.50 p.m. si		
	Column 7: Enter the lett	er "R" if the	listed program	was substituted for progra	amming that ye	our system	was require	ed
		and regulate		ring the accounting period	u, enter the let			
	was substituted for program	nming that y		ring the accounting period				
		nming that y		ring the accounting period				
	was substituted for program	nming that y		ring the accounting period	er FCC rules a	nd regulatio	ns in	1
	was substituted for program effect on October 19, 1976.	nming that y	our system wa	ring the accounting period s permitted to delete unde	er FCC rules a	nd regulatio	ns in	7. REASON FOR
	was substituted for program effect on October 19, 1976.	BUBSTITUT	E PROGRAM	ring the accounting period s permitted to delete unde	WHE CARRI 5. MONTH	nd regulatio N SUBSTI AGE OCCI	ns in TUTE JRRED IMES	
	was substituted for program effect on October 19, 1976.	Note: Substitution of the second seco	our system wa	ring the accounting period s permitted to delete unde	WHE CARRI 5. MONTH	nd regulatio N SUBSTI AGE OCCI 6. T	ns in TUTE JRRED	7. REASON FOR
	was substituted for program effect on October 19, 1976.	BUBSTITUT	E PROGRAM	ring the accounting period s permitted to delete unde	WHE CARRI 5. MONTH	nd regulatio N SUBSTI AGE OCCI	ns in TUTE JRRED IMES	7. REASON FOR
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Accounting Period:	2023/1			FORM	SA1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:			ę	SYSTEM ID#
Name	Fidelity Cablevision, LLC				3502
K Gross Receipts	GROSS RECEIPTS         Instructions: The figure you give in this space determines the form you file an all amounts (gross receipts) paid to your cable system by subscribers for the second in space E) during the accounting period. For a further explanation 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	system's se on of how t	econdary transm to compute this	nission service amount, see \$31	
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 Use block 3 if the amount of gross receipts in space K is more than \$263,800 See page (vi) of the general instructions located in the paper SA1-2 form for more	but less th informatio	an \$527,600 n.	263,800	
	BLOCK 1: GROSS RECEIPTS OF \$13	7,100 OR	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty accounting period is \$52.00	fee that yo	ou must pay for th	is six-montl	
	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 line			-	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LE	,		100)	
	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 \$26	3,800 (but	less than \$527	,600)	
	1. Enter the amount of gross receipts from space K	\$	310,494.00		
	2. Base amount under statutory formula	\$	263,800.00		
	3. Subtract line 2 from line 1	\$	46,694.00		
	4. Multiply line 3 by .01		\$	466.94	
	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		\$	1,785.94
	FILING FEE AND TOTAL REMITTANCE DU	JE			
Filing Fee and	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		\$	1,785.94	
Total Remittance Due	<ol> <li>Filing Fee (See the instructions for more information on filing fee calculations) .</li> </ol>			20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	1,805.94
	Important: Your remittance must be in the form of an electronic pay See page i of the general instructions in the paper SA1	ment payal	ble to the Regis	ter of Copyrig	,
L					

Accounting Period:	2023/1					FORM SA1-2E. PAGE 7
Name	LEGAL NAME OF Fidelity Cable	OWNER OF CABLE SYSTEM: vision, LLC				SYSTEM ID# 3502
<b>M</b> Channels	<ul> <li>to its subscriber</li> <li>1. Enter the tota system carried</li> <li>2. Enter the tota on which the comparison of the total</li> </ul>	rs, and (2) the cable system's al number of channels on whi d television broadcast stations al number of activated channe cable system carried televisio	s total numb ich the cable ns els on broadcas		t stations	15 302
N Individual to Be Contacted for Further		D BE CONTACTED IF FURT about this statement of account Melinda Lahmann		RMATION IS NEEDED (Identify an individual to whom	elephone 573	-468-1216
Information	Address 	64 N Clark (Number, street, rural route, apa Sullivan, MO 63080 (City, town, state, zip) melinda.lahma	)	te number) tycommunications.com Fax (optional)		
O Certification	(Owno (Agen in X (Offic in • I have examine	nt of owner other than corpor line 1 of space B and that the cer or partner) I am an officer line 1 of space B. d the statement of account and te, and correct to the best of m	partnership ration or pa owner is no (if a corpora d hereby dec	y one, of the boxes.) <b>b)</b> I am the owner of the cable system as identified in line 1 <b>rtnership)</b> I am the duly authorized agent of the owner of t t a corporation or partnership; or ation) or a partner (if a partnership) of the legal entity identif clare under penalty of law that all statements of fact contair e, information, and belief, and are made in good faith.	he cable system	
		Typed or printe Title:	Enter an Enter sign ed name: Vice P	/s/ Quynh Tran electronic signature on the line above to certify this stateme nature using an "/s/ signature" (e.g., /s/ John Smith) Quynh Tran resident & Treasurer on held in corporation or partnership)	nt.	
		Date:		August 23, 202	23	

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 the 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 telephol 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 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 t 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

	FORM SA1-2E. PAGE
L NAME OF OWNER OF CABLE SYSTEM:	SYSTEM I
elity Cablevision, LLC	350
<ul> <li>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."     </li> <li>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.</li> <li>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?     </li> <li>X NO</li> <li>YES. Enter the total here and list the satellite carrier(s) below</li></ul>	P Special Statement Concerning Gross Receipts Exclusion
Name     Name       Mailing Address     Mailing Address	
<b>INTEREST ASSESSMENT</b> You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
Line 1 Enter the amount of late payment or underpayment	Interest Assessmen
x         Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessmen
Line 2       Multiply line 1 by the interest rate* and enter the sum here       -         x	Interest Assessmen
Line 2 Multiply line 1 by the interest rate* and enter the sum here	Interest Assessmen
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