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 COPYRIG	FOR COPYRIGHT OFFICE USE ONLY		
for Secondary Transmissions by Cable Systems (Short Form)	DATE RECEIVED	AMOUNT	<u>coplicsoa@copyright.gov</u>	
General instructions are located in the first tab of this workbook.	8/16/23	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.	
A ACCOUNTING PERIOD COV	VERED BY THIS STATEMENT: (Y)	/YY/(Period))		

A	ACC	OUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))	
		2023/1	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		2023	1 Barcode Data Filing Period (optional	- see instructions)	
Accounting Period					
В		Instructions: Give the full legal name of the owner of of the subsidiary, not that of the parent		diary of another corporation, give the full corporate title	
Owner		List any other name or names under wh	ich the owner conducts the business of t	he cable system.	
		If there were different owners during th single statement of account and royalty		the last day of the accounting period should submit a ting period.	
		Check here if this is the system's first fili	ng. If not, enter the system's ID number	assigned by the Licensing Division.	63092
		1			
		LEGAL NAME OF OWNER/MAILIN	NG ADDRESS OF CABLE SYSTEM		
		ACE TELEPHONE COMPANY OF N	IICHIGAN, INC		
		BUSINESS NAME(S) OF OWNER C	OF CABLE SYSTEM (IF DIFFERENT)	
		ACENTEK			
		MAILING ADDRESS OF OWNER O	F CABLE SYSTEM		
		207 E CEDAR, PO BOX 36 (Number, street, rural route, apartment, or suite			
		HOUSTON MN 55943			
С				ntify the business and operation of the system use system, if different from the address given in	
System	1	IDENTIFICATION OF CABLE SYSTEM:			
		MAILING ADDRESS OF CABLE SYSTE	М:		
	2	(Number, street, rural route, apartment, or suite	number)		
		(City, town, state, zip code)			

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.

D Area	ACE TELEPHONE COMPANY OF MICHIGAN, INC Instructions: List each separate community served by the cable system. A "community" a separate and distinct community or municipal entity (including unincorporated commiscrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will see the "first community." Please use it as the first community on all future filings. Iote: Entities and properties such as hotels, apartments, condominiums, or mobile hor dentified city. CITY OR TOWN MESICK ANTIOCH COLFAX BOARDMAN CLEON GRANT MARILLA POLKTON	nunities within unincorporated areas and including single Il serve as a form of system identification hereafter know ne parks should be reported in parentheses below the STATE MI MI MI MI MI MI
D "a di as Served id First Community	Instructions: List each separate community served by the cable system. A "community" a separate and distinct community or municipal entity (including unincorporated commiscrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list wis s 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 hor dentified city. CITY OR TOWN MESICK ANTIOCH COLFAX BOARDMAN CLEON GARFIELD GRANT MARILLA	¹ is the same as a "community unit" as defined in FCC rule nunities within unincorporated areas and including single II serve as a form of system identification hereafter know ne parks should be reported in parentheses below the STATE MI MI MI MI MI MI
D "a di as N Served id	a separate and distinct community or municipal entity (including unincorporated commiscrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list wists 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 hore dentified city.	nunities within unincorporated areas and including single Il serve as a form of system identification hereafter know ne parks should be reported in parentheses below the STATE MI MI MI MI MI MI
Area Served First Community	iscrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list wi s the "first community." Please use it as the first community on all future filings. lote: Entities and properties such as hotels, apartments, condominiums, or mobile hor dentified city.	Il serve as a form of system identification hereafter know ne parks should be reported in parentheses below the STATE MI MI MI MI MI MI
Area Served First Community	s the "first community." Please use it as the first community on all future filings. Iote: Entities and properties such as hotels, apartments, condominiums, or mobile hor dentified city. CITY OR TOWN MESICK ANTIOCH COLFAX BOARDMAN CLEON GARFIELD GRANT MARILLA	ne parks should be reported in parentheses below the STATE MI
Area id Served id	Iote: Entities and properties such as hotels, apartments, condominiums, or mobile hor dentified city.	STATE MI MI MI MI MI MI MI
Area id Served id First Community	dentified city.	STATE MI MI MI MI MI MI MI
First Community	CITY OR TOWN MESICK ANTIOCH COLFAX BOARDMAN CLEON GARFIELD GRANT MARILLA	MI MI MI MI MI MI
Community	MESICK ANTIOCH COLFAX BOARDMAN CLEON GARFIELD GRANT MARILLA	Mi Mi Mi Mi Mi Mi
Community	MESICK ANTIOCH COLFAX BOARDMAN CLEON GARFIELD GRANT MARILLA	MI MI MI MI MI MI
Community	MESICK ANTIOCH COLFAX BOARDMAN CLEON GARFIELD GRANT MARILLA	Mi Mi Mi Mi Mi Mi
Community	ANTIOCH COLFAX BOARDMAN CLEON GARFIELD GRANT MARILLA	Mi Mi Mi Mi Mi
	COLFAX BOARDMAN CLEON GARFIELD GRANT MARILLA	Mi Mi Mi
dd Rows as Necessary	BOARDMAN CLEON GARFIELD GRANT MARILLA	MI MI
dd Rows as Necessary	CLEON GARFIELD GRANT MARILLA	MI
	CLEON GARFIELD GRANT MARILLA	MI
	GARFIELD GRANT MARILLA	
	GRANT MARILLA	MI
	MARILLA	
		MI
	POLKTON	MI
		MI
	SALEM	MI
	MAYFIELD	MI
	SLAGLE	MI
	SPRINGDALE	MI
	BUCKLEY	MI
	OVERSIEL	MI
 	WELDON	MI
	ALLENDALE	MI
	COOPERSVILLE	MI
	HOLLAND	MI
	HANOVER	MI
	PARK	MI
	ROBINSON	MI
	ZEELAND	MI
	ORANGE	MI
	SOUTH BOARDMAN	MI
	SPRINGFIELD	MI
	COPEMISH	MI
	THOMPSONVILLE	MI
	WEXFORD	MI
	BLENDON	MI
		MI
	GEORGETOWN	
	OLIVE	MI

	LEGAL NAME OF OWNER OF CABLE SYSTEM:								-2E. PAGE	
Name	ACE TELEPHONE COM			GAN, INC					6309	
_	SECONDARY TRANSMISSION		IBSCR		ATES					
E	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									
Secondary	, , ,	ces (including pay cable) in space F, not here. All the facts you state must be those existing on the counting period (June 30 or December 31, as the case may be).								
Transmission Service: Sub-	last day of the accounting period Number of Subscribers: Bot	·				,	blo cyctor	, brokon		
scribers and	down by categories of secondar	•					,			
Rates	each category by counting the n			•		•				
	separately for the particular serv					•	,	-		
	Rate: Give the standard rate of	-						-		
	unit in which it is generally billed category, but do not include disc				ny standa	rd rate variatior	ns within a	particular rate		
	Block 1: In the left-hand block				ries of sec	ondary transmi	ssion servi	ice that cable		
	systems most commonly provide			-		•				
	that applies to your system. Not	t e: Where an ir	ndividua	al or organizatio	n is receiv	ing service that	falls unde	r different		
	categories, that person or entity				•••	•••	•			
	subscriber who pays extra for ca					d in the count u	nder "Serv	ice to the		
	first set" and would be counted of Block 2: If your cable system	0			()	service that are	e different	from those		
	printed in block 1 (for example, t	-		•						
	with the number of subscribers a						,.			
	sufficient.				1					
	BLO	OCK 1 NO. OF					BLOC	K 2 NO. OF		
	CATEGORY OF SERVICE	SUBSCRIB		RATE	CATI	EGORY OF SE	RVICE	SUBSCRIBERS	RATE	
	Residential:	CODOCIAD			0, (1)			CODECTIDENCE		
	Service to first set		1,483	39.95						
	 Service to additional set(s) 									
	• FM radio (if separate rate)									
	Motel, hotel									
	Commercial		15	39.95						
	Converter									
	Residential									
	Non-residential									
	SERVICES OTHER THAN SEC	ONDARY TRA	ANSMIS	SIONS: RATE	s					
F	In General: Space F calls for ra	te (not subscril	ber) info	ormation with re	spect to a	ll your cable sy	stem's ser	vices that were		
Г	not covered in space E, that is, t									
Services	service for a single fee. There a furnished at cost or (2) services		,		0		0 (,		
Other Than										
Secondary	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.									
Fransmissions:	Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.									
Rates	Block 2: List any services that your cable system furnished or offered during the accounting period that were not									
	listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.									
		BLO				DATE	04750	BLOCK 2	DATE	
	CATEGORY OF SERVICE Continuing Services:	RATE		GORY OF SER ation: Non-res		RATE	CATEG	ORY OF SERVICE	RATE	
	Pay cable			otel, hotel	luentiai		нво		15.9	
	• Pay cable—add'l channel		•	mmercial			CINEM	ΔΥ	12.5	
	Fire protection			y cable				Z/ENCORE	12.5	
	•Burglar protection			y cable-add'l ch	annel		SHOW		10.99	
	Installation: Residential			e protection			511011		10.3	
	• First set			rglar protection						
	Additional set(s)			services:						
	• Additional set(s) • FM radio (if separate rate)		•	connect						
	• Converter			sconnect						
				SCOTTIECL						
				tlot roloaction						
				tlet relocation	000					

	LEGAL NAME OF OWNER OF	F CABLE SYSTEM:		SYSTEM				
lame	ACE TELEPHONE COMPANY OF MICHIGAN, INC							
	PRIMARY TRANSMITTERS: TELEVISION							
G rimary smitters: evision	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 ru • Do <i>not</i> list the station her station was carried <i>only</i> or		t (1) stations carried only on a part- he carriage of certain network progra 51(e)(2) and (4))]; and (2) certain sta arried by your cable system on a su he Special Statement and Program	time basis under ams [sections ations carried on a bstitute program Log)—if the				
	basis. For further informatic Column 1: List each statio multicast stream associate "WETA-2" as the same on Column 2: Give the chann of license. For example, W	el number the FCC assigned to the tele RC is channel 4 in Washington, D.C.	see page (v) of the general instruct program services such as HBO, ESF e-air designation. For example, repo evision station for broadcasting over	tions. PN, etc. Identify each ort multistream [.] the air in its community				
	educational station, by enter (for independent multicast) For the meaning of these to Column 4: Give the location	n case whether the station is a network ering the letter "N" (for network), "N-M" (, "E" (for noncommercial educational), o erms, see page (iv) of the general instru- on of each station. For U.S. stations, list idian stations, if any, give the name of t	(for network multicast), "I" (for indep or "E-M" (for noncommercial educati uctions in the paper SA1-2 form. t the community to which the station	endent), "I-M" ional multicast). i is licensed by the				
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION				
	WTLJ	54	<u> </u>	GRAND RAPIDS MI				
	WWMT	3	Ν					
Pows as Necessary	L			GRAND RAPIDS MI CBS				
s as Necessary	WWMT	7.2	l	GRAND RAPIDS MI CBS				
s as Necessary	WWMT WOOD	7.2 8.1	l N					
s as Necessary		n e nnennennennennennen en en en en en en en		GRAND RAPIDS MI CW				
s as Necessary	WOOD	8.1	l N	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND				
s as Necessary	WOOD WOOD	8.1 8.2	I N N-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND				
is as Necessary	WOOD WOOD WOOD	8.1 8.2 8.3	I N N-M N-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID				
is as Necessary	WOOD WOOD WOOD WOTV	8.1 8.2 8.3 41.1	I N N-M N-M N	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC				
is as Necessary	WOOD WOOD WOOD WOTV WOTV	8.1 8.2 8.3 41.1 41.2	I N N-M N-M N N-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV	8.1 8.2 8.3 41.1 41.2 41.3	I N N-M N-M N-M N-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV	8.1 8.2 8.3 41.1 41.2 41.3 41.4	I N N-M N-M N-M N-M N-M N-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WOTV	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35	I N N-M N-M N-M N-M N-M N-M N-M E	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS				
rs as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WOTV WGVU WXSP	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1	I N N-M N-M N-M N-M N-M E E I-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WOTV WOTV WOVU WXSP WXSP	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1 15.2	I N N-M N-M N-M N-M N-M E I-M I-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI ABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI COZI				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WGVU WXSP WXSP WXSP	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1 15.2 17	I N N-M N-M N-M N-M N-M E I-M I-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI FOX				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WGVU WXSP WXSP WXSP WXSP	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1 15.2 17 17 17.2	I N N-M N-M N-M N-M N-M E E I-M I-M I I I-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI FOX GRAND RAPIDS MI ANTENNA				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WGVU WXSP WXSP WXSP WXSP WXSP	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1 15.2 17 17.2 17.4	I N N-M N-M N-M N-M N-M E I-M I-M I-M I-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI FOX GRAND RAPIDS MI ANTENNA GRAND RAPIDS MI ANTENNA				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WGVU WXSP WXSP WXSP WXSP WXSP WXMI WXMI	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1 15.2 17 17.2 17.4 17.5	I N N-M N-M N-M N-M N-M E E I-M I I I I I I I I I I I I I I I I I I	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI FOX GRAND RAPIDS MI ANTENNA GRAND RAPIDS MI ANTENNA GRAND RAPIDS MI TRUREAL GRAND RAPIDS MI GETTV				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WGVU WXSP WXSP WXSP WXSP WXXMI WXMI WXMI WXMI	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1 15.2 17 17.2 17.4 17.5 13.1	I N N-M N-M N-M N-M N-M E I I-M I I I I-M I N	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI FOX GRAND RAPIDS MI ANTENNA				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WGVU WXSP WXSP WXSP WXSP WXMI WXMI WXMI WXMI WXMI WXMI WXMI WXMI	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1 15.2 17 17.2 17.4 17.5 13.1 13.2	I N N-M N-M N-M N-M N-M E I-M I.M I.M I.M I.M I.M I.M N N N-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI FOX GRAND RAPIDS MI ANTENNA				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WGVU WXSP WXSP WXSP WXSP WXSP WXMI WXMI WXMI WXMI WXMI WXMI WXMI WZZM	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1 15.2 17 17.2 17.4 17.5 13.1 13.2 13.3	I N N-M N-M N-M N-M N-M E I-M I-M I I I I I N N N N N N N N-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI FOX GRAND RAPIDS MI ANTENNA GRAND RAPIDS MI ANTENNA GRAND RAPIDS MI ANTENNA GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI ANTENNA				
is as Necessary	WOOD WOOD WOOD WOTV WOTV WOTV WOTV WOTV WGVU WXSP WXSP WXSP WXSP WXMI WXMI WXMI WXMI WXMI WXMI WXMI WZZM WZZM	8.1 8.2 8.3 41.1 41.2 41.3 41.4 35 15.1 15.2 17 17.2 17.4 17.5 13.1 13.2 13.3 13.4	I N N-M N-M N-M N-M N-M E I-M I I I-M I I I-M I N N N N N N N N N N N-M	GRAND RAPIDS MI CW GRAND RAPIDS MI NBC GRAND RAPIDS MI REWIND GRAND RAPIDS MI SPORTS GRID BATTLE CREEK MI ABC BATTLE CREEK MI DABL BATTLE CREEK MI CHARGE BATTLE CREEK MI WEATHER GRAND RAPIDS MI PBS GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI MY NETWORK GRAND RAPIDS MI FOX GRAND RAPIDS MI ANTENNA GRAND RAPIDS MI ABC GRAND RAPIDS MI WEATHER GRAND RAPIDS MI ABC GRAND RAPIDS MI WEATHER GRAND RAPIDS MI WEATHER				

	-			SYSTEM				
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:							
	ACE TELEPHONE COMPANY OF MICHIGAN, INC							
	PRIMARY TRANSMITTERS:	TELEVISION						
G	•	entify every television station (including the	•	,				
Ŭ		em during the accounting period, <i>except</i> in effect on June 24, 1981, permitting the						
Primary	76.59(d)(2) and (4), 76.61	(e)(2) and (4), or 76.63 (referring to 76.61		-				
ransmitters: Television		as explained in the next paragraph. s: With respect to any distant stations car	rried by your cable system on a s	ubstitute program				
	basis under specific FCC r	ules, regulations, or authorizations:						
	 Do not list the station here station was carried only or 	re in space G—but do list it in space I (the n a substitute basis	e Special Statement and Progran	n Log)—if the				
	 List the station here, and 	also in space I, if the station was carried						
		on concerning substitute basis stations, s on's call sign. <i>Do not</i> report origination pr						
		ed with a station according to its over-the-	•					
	"WETA-2" as the same on		vision station for broadcasting our	ar the air in its community				
	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							
	Column 3: Indicate in eac	h case whether the station is a network s						
	Column 3: Indicate in eac educational station, by ent	h case whether the station is a network s ering the letter "N" (for network), "N-M" (for	or network multicast), "I" (for inde	pendent), "I-M"				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t	h case whether the station is a network s ering the letter "N" (for network), "N-M" (f), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc	or network multicast), "I" (for inde "E-M" (for noncommercial educa ctions in the paper SA1-2 form.	pendent), "I-M" tional multicast).				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location	h case whether the station is a network s ering the letter "N" (for network), "N-M" (f), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc on of each station. For U.S. stations, list t	or network multicast), "I" (for inde "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the statio	pendent), "I-M" tional multicast). n is licensed by the				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location	h case whether the station is a network s ering the letter "N" (for network), "N-M" (f), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc	or network multicast), "I" (for inde "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the statio	pendent), "I-M" tional multicast). n is licensed by the				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location	h case whether the station is a network s ering the letter "N" (for network), "N-M" (f), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc on of each station. For U.S. stations, list t	or network multicast), "I" (for inde "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the statio	pendent), "I-M" tional multicast). n is licensed by the				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location	h case whether the station is a network s ering the letter "N" (for network), "N-M" (f), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc on of each station. For U.S. stations, list t	or network multicast), "I" (for inde "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the statio	pendent), "I-M" tional multicast). n is licensed by the				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana	h case whether the station is a network s ering the letter "N" (for network), "N-M" (fi), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list t adian stations, if any, give the name of the	or network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the statio e community with which the statio	pendent), "I-M" tional multicast). n is licensed by the on is identified.				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN	h case whether the station is a network s ering the letter "N" (for network), "N-M" (fo), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list t adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER	or network multicast), "I" (for inde r "E-M" (for noncommercial educa tions in the paper SA1-2 form. the community to which the station e community with which the station 3. TYPE OF STATION	pendent), "I-M" itional multicast). n is licensed by the on is identified. 4. LOCATION OF STATION				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WPBN	h case whether the station is a network s ering the letter "N" (for network), "N-M" (fi), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- on of each station. For U.S. stations, list t adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 7.1	or network multicast), "I" (for inde "E-M" (for noncommercial educa- ctions in the paper SA1-2 form. the community to which the statio e community with which the statio 3. TYPE OF STATION N	pendent), "I-M" itional multicast). n is licensed by the on is identified. 4. LOCATION OF STATION TRAVERSE CITY MI NBC				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WPBN WPBN	h case whether the station is a network s ering the letter "N" (for network), "N-M" (fi), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list t adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 7.1 7.3	or network multicast), "I" (for inde r "E-M" (for noncommercial educa ctions in the paper SA1-2 form. the community to which the station e community with which the station 3. TYPE OF STATION N N-M	pendent), "I-M" tional multicast). n is licensed by the on is identified. 4. LOCATION OF STATION TRAVERSE CITY MI NBC TRAVERSE CITY MI COMET				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WPBN WPBN WGTU	h case whether the station is a network s ering the letter "N" (for network), "N-M" (fi), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- on of each station. For U.S. stations, list t adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 7.1 7.3 29	or network multicast), "I" (for inde r "E-M" (for noncommercial educa- tions in the paper SA1-2 form. the community to which the station e community with which the station 3. TYPE OF STATION N N -M N	pendent), "I-M" tional multicast). n is licensed by the on is identified. 4. LOCATION OF STATION TRAVERSE CITY MI NBC TRAVERSE CITY MI COMET TRAVERSE CITY MI ABC				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WPBN WPBN WBN WGTU WWTV	h case whether the station is a network s ering the letter "N" (for network), "N-M" (fi), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- on of each station. For U.S. stations, list the adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 7.1 7.3 29 40	or network multicast), "I" (for inde r "E-M" (for noncommercial educa- ctions in the paper SA1-2 form. the community to which the station e community with which the station 3. TYPE OF STATION N N N N N N	pendent), "I-M" tional multicast). n is licensed by the on is identified. 4. LOCATION OF STATION TRAVERSE CITY MI NBC TRAVERSE CITY MI COMET TRAVERSE CITY MI ABC TRAVESE CITY MI CBS				
	Column 3: Indicate in eac educational station, by ent (for independent multicast For the meaning of these t Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WPBN WPBN WPBN WGTU WWTV WWTV	h case whether the station is a network s ering the letter "N" (for network), "N-M" (fi), "E" (for noncommercial educational), or erms, see page (iv) of the general instruc- on of each station. For U.S. stations, list t adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 7.1 7.3 29 40 9.3	or network multicast), "I" (for inde r "E-M" (for noncommercial educa- ctions in the paper SA1-2 form. the community to which the station e community with which the station 3. TYPE OF STATION N N N N N N	pendent), "I-M" tional multicast). n is licensed by the on is identified. 4. LOCATION OF STATION TRAVERSE CITY MI NBC TRAVERSE CITY MI NBC TRAVERSE CITY MI COMET TRAVERSE CITY MI ABC TRAVESE CITY MI CBS CADILLAC MI METV				
	Column 3: Indicate in eac educational station, by ent (for independent multicast) For the meaning of these the Column 4: Give the location FCC. For Mexican or Cana 1. CALL SIGN WPBN WPBN WPBN WGTU WWTV WWTV WMNN	h case whether the station is a network s ering the letter "N" (for network), "N-M" (fi), "E" (for noncommercial educational), or terms, see page (iv) of the general instruc- on of each station. For U.S. stations, list t adian stations, if any, give the name of the 2. B'CAST CHANNEL NUMBER 7.1 7.3 29 40 9.3 26	or network multicast), "I" (for inde r "E-M" (for noncommercial educa- ctions in the paper SA1-2 form. the community to which the station e community with which the station 3. TYPE OF STATION N N N N I I I	pendent), "I-M" tional multicast). n is licensed by the on is identified. 4. LOCATION OF STATION TRAVERSE CITY MI NBC TRAVERSE CITY MI NBC TRAVERSE CITY MI COMET TRAVERSE CITY MI ABC TRAVESE CITY MI ABC CADILLAC MI METV CADILLAC MI MI NEWS 26				

all-band basis whose signals were generally receivable by your cable system during the accounting period.Private in the system of t	EGAL NAME OF			Y OF MICHIGAN, INC					SYSTEM I 630
 Trans Total and the comparison of the product of	n General: List	t every radio s	station ca	arried on a separate and disc					Н
CALL SIGN AM or FM S/D LOCATION OF STATION CALL SIGN AM or FM S/D LOCATION OF STATION IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Special Instruct eceivable if (1) on the basis of it for detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: G	ctions Conce it is carried by monitoring, to prmation about rm. dentify the call tate whether it the radio stat this by placing Sive the station	rning A y the sys be rece it the Co I sign of the static ion's sig g a chec n's locati	II-Band FM Carriage: Under stem whenever it is received a ived at the headend, with the pyright Office regulations on each station carried. on is AM or FM. inal was electronically process k mark in the "S/D" column. ion (the community to which t	Copyright Office at the system's he system's FM ant this point, see pa sed by the cable he station is licer	regulations, an eadend, and (enna, during o ge (v) of the g system as a s ised by the FC	n FM sig 2) it can certain s jeneral ii eparate	inal is generally be expected, tated intervals. instructions 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	
Image: And Ample and Ampl				·					
Image: A set of the set of t									
Image: Section of the section of th									
Image: Section of the section of th									
Image: Section of the section of th									
Image: section of the section of th									
Image: Section of the section of th									
Image: Section of the section of th	·								
Image: Section of the section of th									
Image: Section of the section of th									
Image: Section of the section of th									
Image: Section of the section of th									

Name	od: 2023/1						FORM	M SA1-2E. PAGE 5.
Namo	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:					SYSTEM ID#
Name	ACE TELEPHONE CO	MPANY O	F MICHIGA	N, INC				63092
	SUBSTITUTE CARRIAGI	E: SPECIA	AL STATEME	NT AND PROGRAM LO	G			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	ccounting p	eriod, under sp	ecific present and former F	CC rules, reg	ulations, or	authorization	ns. For a further
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE	-			
Special Statement and	 During the accounting per 	iod, did yoι	ur cable syster	n carry, on a substitute ba	sis, any nonr	network tel	evision prog	
Program Log	broadcast by a distant sta	tion?					YES	× NO
	Note: If your answer is "No	," leave the	rest of this pa	ge blank. If your answer is	s "Yes," you r	nust comp	lete the prog	
	log in block 2.		Me					
	2. LOG OF SUBSTITUTE In General: List each subst			ate line. Use abbreviations	s wherever po	ossible, if t	heir meaning	a is
	clear. If you need more spa				, more re. p			5.0
				vision program ("substitute				
	period, was broadcast by a under certain FCC rules, re							
	Do not use general categor							
	"NBA Basketball: 76ers vs.					Mampie, 1	Love Lucy	
				er "Yes." Otherwise enter "				
				asting the substitute progr		anaad bu	the ECC er	in
	the case of Mexican or Car			he community to which the community with which the			the FCC or,	In
				stem carried the substitute			ls, with the n	nonth
	first. Example: for May 7 giv							
	Column 6: State the time to the nearest five minutes.			ogram was carried by your				ately
	stated as "6:00–6:30 p.m."		a program can	led by a system norm 0.01	. 15 p.m. to 0	.20.30 p.n		
		er "R" if the	listed program	n was substituted for progr	amming that	your syste	em was <i>requ</i>	ired
	to delete under FCC rules a							ogram
	was substituted for program effect on October 19, 1976.		our system w	as permitted to delete und	er FCC rules	and regul	ations in	
	SI		E PROGRAM			N SUBST		
		2. LIVE?				AGE OCC		7. REASON FOR
	1. TITLE OF PROGRAM	Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY		CURRED TIMES — TO	7. REASON FOR DELETION
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	
	1. TITLE OF PROGRAM				5. MONTH	6.	TIMES	

Accounting Period:	2023/1 FORM SA1-2E. PAG	GE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ACE TELEPHONE COMPANY OF MICHIGAN, INC 630	ID# 092
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total c all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, se page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts form subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross 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 \$263,800 • 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 this six-month 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	<u> </u>
	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 \$137,100)	
	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
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8	
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)	
	1. Enter the amount of gross receipts from space K \$ 379,157.64	
	2. Base amount under statutory formula \$ 263,800.00	
	3. Subtract line 2 from line 1	
	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 \$ 2,472.58	B
	FILING FEE AND TOTAL REMITTANCE DUE	
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$ 2,472.58	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 2,492.58	B
	EFT Trace # or TRANSACTION ID # 76479418660	
	Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights. See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more information.	

Accounting Period:	2023/1	FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: ACE TELEPHONE COMPANY OF MICHIGAN, INC	SYSTEM ID# 63092
M Channels	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	32
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	285
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED (Identify an individual we can contact about this statement of account.)	
for Further Information	Name CYNTHIA SWEET Telephone	507 896 6211
	Address 207 E CEDAR, PO BOX 360 (Number, street, rural route, apartment, or suite number) HOUSTON MN 55943 (City, town, state, zip)	
	Email csweet@acentek.net Fax (optional)	
•	CERTIFICATION (This statement of account must be certified and signed in accordance with Copyright Office regulations))
O Certification	• I, the undersigned, hereby certify that (Check one, <i>but only one</i> , of the boxes.)	_
	(Owner other than corporation or partnership) I am the owner of the cable system as identified in line 1 of space	
	 (Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable 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 o 	
	 I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained here are true, complete, and correct to the best of my knowledge, information, and belief, and are made in good faith. [18 U.S.C., Section 1001(1986)] 	
	Enter an electronic signature on the line above to certify this statement. Enter signature using an "/s/ signature" (e.g., /s/ John Smith)	
	Typed or printed name: MICHAEL OBSORNE	
	Title: CEO (Title of official position held in corporation or partnership)	
	Date: 08/15/2023	

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.

ETELEPHONE COMPANY OF MICHIGAN, INC 630 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS Image: Comparing 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." Image: Comparing transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." Image: Comparing transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." Image: Comparing transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." Image: Comparing transmissions pursuant to section 119."	ounting Period:	2023/1	FORM SA1-2E. PAGE 8
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS 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 to readvalst transmitters, the system shall not include sub- cribers and amount colocitation of subscribers receiving secondary transmissions receiving secondary transmissions of primary to readvalst transmitters, the system shall not include sub- cribers and amount colocitation on subscribers receiving secondary transmissions located in the paper SA1-2 form. If the subscribers and being secondary transmissions and be stabilite carrier to satellite data owners? If NO If YES. Enter the total here and list the satellite carrier(s) below. If the second sec	AL NAME OF OW	NER OF CABLE SYSTEM:	SYSTEM ID
The Satellite Home Viewer Act of 1988 amended Tite 17, section 111(q)(1)(A), of the Copyright Act by adding the fol- lowing sentence. The determining the total number of subscribers and the gross amounts paid to the cable system for the basic scribers 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 Cocceeding the page 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 dari owners? Winner Meming Address Name Meming Address Name Meming Address Name Line 1 Enter the amount of late payment or underpayment. For one vorthander of interest rate* and enter the sum here xdays Line 2 Multiply line 1 by the interest rate* and enter the sum here xdays Line 3 Multiply line 3 by 0.00274***********************************	E TELEPHON	NE COMPANY OF MICHIGAN, INC	6309
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. Image the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? Image the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite carrier(s) below. \$ Image the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier(s) below. Image the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier(s) below. Image the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carrier(s) below. Image the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions for the set set of the general instructions located in the paper SA1-2 form. Image the accounting period, did the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment.	The Satellite H lowing sentend "In dete service	ome Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol- e: rmining the total number of subscribers and the gross amounts paid to the cable system for the basic of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub-	- Special Statement Concerning Gross
made by satellite carriers to satellite dish owners? NO YES. Enter the total here and list the satellite carrier(s) below			
YES. Enter the total here and list the satellite carrier(s) below. \$ Name Name Maling Address Name Maling Address Name INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Interest Assessment Line 1 Enter the amount of late payment or underpayment	made by satell		
Name Mame Maling Address Mame Maling Address Mame INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Interest Assessment Line 1 Enter the amount of late payment or underpayment .	X NO		
Mailing Address Mailing Address Image: Address Image: Address INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Address Image: Address Line 1 Enter the amount of late payment or underpayment	YES. Ente	r the total here and list the satellite carrier(s) below	
You must complete this worksheet for those royally payments submitted as a result of a late payment or underpayment. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Image: Comparison of			
Line 2 Multiply line 1 by the interest rate* and enter the sum here	You must com	plete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	Q
Line 3 Multiply line 2 by the number of days late and enter the sum here	Line 1 Enter t	he amount of late payment or underpayment	Interest Assessmen
Line 3 Multiply line 2 by the number of days late and enter the sum here		x	
Line 3 Multiply line 2 by the number of days late and enter the sum here	Line 2 Multipl	y line 1 by the interest rate* and enter the sum here	
x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6		xdays	
Line 4 Multiply line 3 by 0.00274** and enter here in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	Line 3 Multipl	· · ·	
in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	Line 4 Multipl		
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 list below the owner, address, first community served, ID number, and accounting period as given in the original filing.		- L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6	
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 given in the original filing.		ne interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please	
list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served	** This is th	e decimal equivalent of 1/365, which is the interest assessment for one day late.	
Address ID number First community served	-		
First community served			
Accounting period		y served	
	Accounting pe	riod	

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 th 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.