This form is effective beginning with the January 1 to June 30, 2017 accounting period (2017/1)

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

SA1-2E Short Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook

FOR COPYRIGHT OFFICE USE ONLY						
DATE RECEIVED	AMOUNT					
2/12/2024	\$ ALLOCATION NUMBER					

Return completed workbook by email to:

coplicsoa@loc.gov

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

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		20232 Barcode Data Filing Period (optional - see instructions)
Accounting Period		
В		Instructions: 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.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		T
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		Union Information Systems BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		PO Box 96 (Number, street, rural route, apartment, or suite number)
		Plainfield, WI 54966
		(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 unless these salready appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1	IDENTIFICATION OF CABLE SYSTEM:
		MAILING ADDRESS OF CABLE SYSTEM:
	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 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.

	T	FORM SA1-2E. PAGE
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Union Information Systems	SYSTEM II 633:
	Instructions: List each separate community served by the cable system. A "community	
D	separate and distinct community or municipal entity (including unincorporated comm	
D	unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will serv	
	community." Please use it as the first community on all future filings.	e as a rorm or system racriamount mercanter and an as the
	Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho	ama parks should be reported in parentheses helpy the identifi
Area	city.	one parks should be reported in parentheses below the identif
Served	City.	
	CITY OR TOWN	STATE
First	Almond	WI
Community	Buena Vista	WI
	Plainfield	WI
Rows as Necessary	Almond Village	WI
	Oasis	WI
	Hancock	WI
	Coloma	WI
	Lanark	WI
	Pine Grove	WI
	Belmont	WI
	Richfield	WI
	Colburn	WI
	Grant	WI
	Leola	WI
	Coloma Village	WI
	Hancock Village	WI
	Richford	WI
	Plainfield Village	WI
	Deerfield	WI
	Rose	WI
	Newton	WI
	Newton	***

Accounting Period: 2023/2

FORM SA1-2E. PAGE 2.

LEGAL NAME OF OWNER OF CABLE SYSTEM:

Name

SYSTEM ID#

63390

Ε

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

Union Information Systems

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.

BLO	OCK 1	BLOCK 2			
CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE	CATEGORY OF SERVICE	NO. OF SUBSCRIBERS	RATE
Residential:					
Service to first set	654	44.95	Expanded	365	88.90
Service to additional set(s)	533	4.95	Basic	223	76.45
• FM radio (if separate rate)					
Motel, hotel					
Commercial					
Converter					
Residential					
Non-residential					

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				
CATEGORY OF SERVICE	ATEGORY OF SERVICE RATE CATEGORY OF SERVICE RATE				
Continuing Services:		Installation: Non-residential			
Pay cable		Motel, hotel	25.00	Replacement Remote	25.00
 Pay cable—add'l channel 		Commercial	25.00	Service Call	30.00
Fire protection		• Pay cable		Local Station Fee	13.00
Burglar protection		Pay cable-add'l channel			
Installation: Residential		Fire protection		Record Change	6.00
• First set	25.00	Burglar protection			
Additional set(s)		Other services:			
• FM radio (if separate rate)		Reconnect	20.00	DVR	9.95
Converter		Disconnect		HD Equipment	11.95
		Outlet relocation	25.00		
		Move to new address			

Accounting Period: 2023/2 FORM SA1-2E. PAGE 3.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 63390

Union Information Systems

PRIMARY TRANSMITTERS: TELEVISION

G

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 ECC rules and regulations in effect on June 24, 1981, permitting the carriage of certain petwork programs [sections]

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 and 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 multistream "WETA-2" as the same on the form.

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 in the paper SA1-2 form.

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.

Add Rows as Necessary

1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
WACY	32	N	GREEN BAY/APPLETON, WI
WACW	9.1	N	WAUSAU/RHINELANDER, WI
WACW	9.2	N	WAUSAU/RHINELANDER, WI
WACW	9.3	N	WAUSAU/RHINELANDER, WI
WBAY	2.1	N	GREEN BAY/APPLETON, WI
WBAY	2.2	N	GREEN BAY/APPLETON, WI
WFRV	5	N	GREEN BAY/APPLETON, WI
WGBA	26	N	GREEN BAY/APPLETON, WI
WHRM	20.1	N	WAUSAU/RHINELANDER, WI
WHRM	20.2	N	WAUSAU/RHINELANDER, WI
WHRM	20.3	N	WAUSAU/RHINELANDER, WI
WHRM	20.4	N	WAUSAU/RHINELANDER, WI
WIWB	14	l	GREEN BAY/APPLETON, WI
WLUK	11	N	GREEN BAY/APPLETON, WI
WSAW	7.1	N	WAUSAU/RHINELANDER, WI
WSAW	7.2	N	WAUSAU/RHINELANDER, WI
WSAW	7.3	N	WAUSAU/RHINELANDER, WI
WSAW	55	N	WAUSAU/RHINELANDER, WI

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Union Information Systems

63390

PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.

Н

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. paper SA1-2 form.

Primary Transmitters: Radio

Column 1: Identify the call sign of each station carried.

Column 2: State whether the station is AM or FM.

Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION
			 				
			 				
			 				
			 			 	
							t

Accounting Perio	nd: 2023/2						FORM SA1-2E. PAGE 5.			
_	LEGAL NAME OF OWNER OF	CABLE SYST	EM:				SYSTEM ID#			
Name	Union Information Sys	tems					63390			
	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG									
Substitute	In General: In space I, identifi substitute basis during the ac explanation of the programmi	counting pe	riod, under spec	cific present and former FCC	crules, regulat	tions, or authoriz	ations. For a further			
Carriage:	1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE									
Special Statement and	 During the accounting peri 	od, did you	r cable system	carry, on a substitute basis	s, any nonnet	work television p	orogram			
Program Log	broadcast by a distant stat	ion?				\	res No			
	Note: If your answer is "No"	, leave the	rest of this pag	e blank. If your answer is "	Yes," you mu	st complete the	program			
	log in block 2.									
	2. LOG OF SUBSTITUTE			ta lina. I laa ahbraviatiana u		sible if their week	anina ia			
	In General: List each subst clear. If you need more space				vnerever poss	sible, if their mea	aning is			
				sion program ("substitute p						
	period, was broadcast by a under certain FCC rules, reg		•	•		Ū				
	Do not use general categori	es like "mo								
	"NBA Basketball: 76ers vs.		lcast live enter	"Yes." Otherwise enter "N	o."					
	Column 3: Give the call s	sign of the s	station broadca	sting the substitute prograr	n.					
	Column 4: Give the broathe case of Mexican or Can			e community to which the s			c or, in			
				em carried the substitute p			he month			
	first. Example: for May 7 giv				.111	Literature Berner				
	to the nearest five minutes.			gram was carried by your c ed by a system from 6:01:1						
	stated as "6:00-6:30 p.m."	·	. 0	•	•	•				
	to delete under FCC rules a			was substituted for program		•	•			
	was substituted for program									
	effect on October 19, 1976.									
					WHE	E				
	S	UBSTITUT	E PROGRAM		CARRIA	DELETION				
	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 —	то			
						_				
						_				
						_				
		L								

2023/2			FORM	SA1-2E. PAGE
LEGAL NAME OF OWNER OF CABLE SYSTEM: Union Information Systems				SYSTEM ID 6339
all amounts (gross receipts) paid to your cable system by subscribers for the sys (as identified in space E) during the accounting period. For a further explanation page (vii) of the general instructions located in the paper SA1-2 form.	stem's sec	ondary transm	ission service	
during the accounting period			-	44,800.00 gross receipts)
• Use block 3 if the amount of gross receipts in space K is more than \$263,800 bu	ut less thar		263,800	
BLOCK 1: GROSS RECEIPTS OF \$137,	100 OR L	ESS		
	ee that you	must pay for th	nis six-month	
•				
				0.00
Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add line	es 1 and 2 .			
			•	
Base amount under statutory formula	\$	263,800.00	-	
Enter amount of gross receipts from space K	\$	244,800.00	_	
3. Subtract line 2 from line 1	\$	19,000.00	_	
Enter the amount of gross receipts from space K		\$	244,800.00	_
5. Enter the amount from line 3	· · · · · · -	\$	19,000.00	_
6. Subtract line 5 from line 4	_	\$:	225,800.00	_
7. Multiply line 6 by .005 (enter figure here)			\$	1,129.00
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 a	and 8		\$	1,129.00
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,8	800 (but le	ess than \$527	,600)	
Enter the amount of gross receipts from space K				
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)	<u>.</u>	\$	1,319.00	_
6. Interest charge. Enter the amount from line 4, space Q, page 8	<u> </u>		0.00	_
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 8	5, and 6			
FILING FEE AND TOTAL REMITTANCE DUE				
1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	<u>.</u>	\$	1,129.00	_
O Filing For (October instance)	<u>.</u>	\$	20.00	-
2. Filing Fee (See the instructions for more information on filing fee calculations)				
Total amount due for accounting Period. Add lines 2 and 3			\$	1,149.00
	Union Information Systems GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and all amounts (gross receipts) paid to your cable system by subscribers for the sy (as identified 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 in IMPORTANT: You must complete a statement in space P concerning gross receipts in IMPORTANT: You for gross receipts in space K is \$137,100 or less 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 more than \$137,100 to less Use block 3 if the amount of gross receipts in space K is more than \$137,100 to less to Use block 3 if the amount of gross receipts in space K is more than \$137,100 to less to Use block 3 if the amount of gross receipts in space K is more than \$137,100 to less to Use block 3 if the amount of gross receipts in space K is more than \$137,100 to less to use block 3 if the amount of gross receipts in space K is more than \$137,100 to less, the royalty f accounting period is \$52.00 Line 1. Royalty fee for accounting period. Line 1. Royalty fee for accounting period. Line 2. Interest charge. Enter the amount from line 4, space Q, page 8. Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add line BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES: 1. Base amount under statutory formula 2. Enter the amount of gross receipts from space K 5. Enter the amount of gross receipts from space K 5. Enter the amount of gross receipts from space K 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 1 in the paper of the pa	LEGAL NAME OF OWNER OF CABLE SYSTEM: Union Information Systems GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount all amounts (gross receipts) paid to your cable system by subscribers for the system's sec (as identified in space P), during the accounting period, For a further explanation of how to 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. 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 start, 100 but less than 1. Sub-block 2 if the amount of gross receipts in space K is more than \$137,100 but less than 2. Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than 5ee page (vii) of the general instructions located in the paper SA1-2 form for more information. BLOCK 1: GROSS RECEIPTS OF \$137,100 OR L Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you 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. 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 statutory formula). \$ 2. Enter the 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 of gross receipts from space K. 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but let the amount of gross receipts from space K. 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but let let the amount of g	LEGAL NAME OF OWNER OF CABLE SYSTEM: Union Information Systems GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. En all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transming (as identified in space E) during the accounting period. For a further explanation of how to compute this capage (vil) 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. COPYRIGHT ROYALTY FEE Instructions: To compute the royally fee you owe: Complete block 1, block 2, or block 3. Use block 1 fithe amount of gross receipts in space K is smore than \$137,100 but less than or equal to \$\$. Use block 2 fithe amount of gross receipts in space K is more than \$137,100 but less than or equal to \$\$. Use block 3 fithe amount of gross receipts pasce K is more than \$137,100 but less than or equal to \$\$. Use block 3 fithe amount of gross receipts pasce K is more than \$137,100 but less than or equal to \$\$. Use block 3 fithe amount of gross receipts appear k is more than \$137,100 but less than or equal to \$\$. Use block 3 fithe amount of gross receipts in space K is more than \$137,100 but less than \$527,600 because the space K is more than \$137,100 but less than \$527,600 because the space K is pasce K is more than \$137,100 but less than \$527,600 because the space K is pasce K is more than \$137,100 but less than \$527,600 because the space K is pasce	LEGAL NAME OF OWNER OF CABLE SYSTEM Union Information Systems GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the amount you pay. Enter the total of all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission service is all definition in space 2) during the accounting period. For a further explanation of how to compute this amount, see population of the accounting period of the property of the system's secondary transmission service(s) during the accounting period. Line Accounting period. COPYRICHT ROYALTY FEE Instructions: To compute the reyalty fee you wave: Complete blook 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is more than \$137,100 or less. Use block 2 if the amount of gross receipts in space K is more than \$137,100 out less than or equal to \$263,800. See page (vi) of the general instructions located in the paper \$54.2 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. 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 the amount of gross receipts from space K. \$ 244,800.00 5. Enter the amount from line 4. \$ 225,800.00 1. Enter the amount from line 4. \$ 225,800.00 1. Enter the amount from line 4. \$ 225,800.00 1. Enter the amount of gross receipts from space K. 2. Base amount under statutory formula. \$ 263,800.00 1. Enter the amount of gross receipts from space K. 2. Base amount under statutory formula. 3. Subtract line 5 from line 4. 4. Enter the amount of gross receipts from space K. 2. Base amount under s

Accounting Period:	2023/2				FORM SA1-2E. PAGE 7.			
Name	LEGAL NAME OF O Union Informat	WNER OF CABLE SYSTEM: ion Systems			SYSTEM ID# 63390			
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							
	on which the	I number of activated channe cable system carried televisio dcast services			204			
N Individual to Be Contacted		BE CONTACTED IF FURTH about this statement of accou	IER INFORMATION IS NEEDED (Identify an indut.)	dividual to whom				
for Further Information	Name	Roxi Hacker		Telephone	320-848-6641			
	Address	130 Birch Avenue We	· 					
		Hector, MN 55342 (City, town, state, zip)						
	Email	roxih@interstate	etelcom.com	Fax (optional				
	CERTIFICATION (This statement of account mu	st be certified and signed in accordance with C	opyright Office regulations)				
O Certification	• I, the undersigne	d, hereby certify that (Check or	e, but only one, of the boxes.)					
	(Owner	r other than corporation or pa	artnership) I am the owner of the cable system as	s identified in line 1 of space I	3; or			
			tion or partnership) I am the duly authorized age e owner is not a corporation or partnership; or	ent of the owner of the cable s	system as identified			
		er or partner) I am an officer (i in line 1 of space B.	a corporation) or a partner (if a partnership) of the	e legal entity identified as ow	ner of the cable system			
		te, and correct to the best of my	nereby declare under penalty of law that all statem whowledge, information, and belief, and are made					
			X /s/ Raymond P Tetzloff					
			Enter an electronic signature on the line above to c Enter signature using an "/s/ signature" (e.g., /s/ Jo	-				
		Typed or printed	name: Raymond P Tetzloff					
		Title:	General Manager and CEO e of official position held in corporation or partnership)					
		Date:		2/9/2024				

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.

counting Period: 2023/2	FORM SA1-2E. PAGE 8.
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
nion Information Systems	63390
SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? X NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Mailing Address Mailing Address Mailing Address	
INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Line 1 Enter the amount of late payment or underpayment	Q Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
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	
* 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@loc.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.	
Owner Address	
ID number First community served Accounting period	

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the fling, a determination that would be made by a court of law.