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

STATEM	ENT OF ACCOUNT	FOR COPYRIGH	T OFFICE USE ONLY	Return completed workbook by email to:
for Seconda	ry Transmissions by	DATE RECEIVED	AMOUNT	 <u>coplicsoa@loc.gov</u>
General instru	ems (Short Form) actions are located of this workbook	2/27/25	\$ ALLOCATION NUMBER	For additional information, contact the U.S. Copyright Office Licensing Division at: Tel: (202) 707-8150
Α	ACCOUNTING PERIOD COVERED	BY THIS STATEMENT: (Y	YYY/(Period))	
	2024/2	Period 1 = January 1 - June 30	Period 2 = July 1 - December 31	
		Barcode Data Filing Period (optional	- see instructions)	
Accounting Period				
В	Instructions: Give the full legal name of the owner of title of the subsidiary, not that of the pa		idiary of another corporation, give the full c	corporate
Owner	List any other name or names under wh	ich the owner conducts the business of t	he cable system.	
		e accounting period, only the owner on fee payment covering the entire accoun	the last day of the accounting period should ting period.	d submit a
	Check here if this is the system's first fil	ing. If not, enter the system's ID number	assigned by the Licensing Division.	28046
	LEGAL NAME OF OWNER/MAILI	NG ADDRESS OF CABLE SYSTEM		
	WAVE DIVISION HOLDINGS LLC			
	BUSINESS NAME(S) OF OWNER (OF CABLE SYSTEM (IF DIFFERENT)	
	MAILING ADDRESS OF OWNER O	F CABLE SYSTEM		
	3700 MONTE VILLA PARK (Number, street, rural route, apartment, or suite			
	BOTHELL WA 98021 (City, town, state, zip)			
С	INSTRUCTIONS: In line 1, give any bus names already appear in space B. In lin			

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.

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

IDENTIFICATION OF CABLE SYSTEM:

(Number, street, rural route, apartment, or suite number)

WAVE BROADBAND MAILING ADDRESS OF CABLE SYSTEM: 3700 MONTE VILLA PARKWAY

BOTHELL WA 98021

System

1

2

Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC	SYSTEM II 2804
D	Instructions: List each separate community served by the cable system. A "a separate and distinct community or municipal entity (including unincor discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community as the "first community." Please use it as the first community on all future	"community" is the same as a "community unit" as defined in FCC rule porated communities within unincorporated areas and including single that you list will serve as a form of system identification hereafter kno
Area Served	Note: Entities and properties such as hotels, apartments, condominiums, o identified city.	
	CITY OR TOWN	STATE
First Community	CHELAN	WA
dd Rows as Necessary		

								FORM SA1-	
Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:					SYS	
	WAVE DIVISION HOLDI	NGS LLC							2804
-	SECONDARY TRANSMISSION	SERVICE: SI	JBSCRI	BERS AND R	ATES				
E	In General: The information in s			-		•			
Secondary	system, that is, the retransmission about other services (including particular services)								
Transmission	last day of the accounting period							ing on the	
Service: Sub-	Number of Subscribers: Both						ble system	, broken	
scribers and	down by categories of secondar	•		•		•			
Rates	each category by counting the n			0,0		•		charged	
	separately for the particular serv Rate: Give the standard rate of							le and the	
	unit in which it is generally billed	-	-	•			-		
	category, but do not include disc	· ·	,		,				
	Block 1: In the left-hand block	•		Ũ		•			
	systems most commonly provide								
	that applies to your system. Not categories, that person or entity								
	subscriber who pays extra for ca								
	first set" and would be counted of	once again und	ler "Serv	vice to addition	al set(s)."				
	Block 2: If your cable system	-							
	printed in block 1 (for example, t with the number of subscribers a								
	sufficient.	and rates, in th	e ngnt-n	Ianu Diock. A li	vo- or the	e-word descrip		ervice is	
	BLO	DCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATE	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RAT
	Residential:	000001110			0,			000001.0021.00	
	Service to first set		374	37.95					
	 Service to additional set(s) 								
	• FM radio (if separate rate)								
	Motel, hotel		24	5.61					
	Commercial		10	18.98					
	Converter								
	Residential								
	Non-residential								
	SERVICES OTHER THAN SEC					ll vour ochio ov	ntom'o con	icco that word	
F	In General: Space F calls for ra not covered in space E, that is, t								
_	service for a single fee. There a					,	,		
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the ur		usually	billed. If any ra	ates are ch	narged on a var	iable per-pi	ogram basis,	
Secondary ransmissions:	enter only the letters "PP" in the Block 1: Give the standard rate		the cable	e system for ea	ach of the	applicable servi	ces listed		
Rates	Block 2: List any services that							were not	
	listed in block 1 and for which a				shed. List	these other ser	vices in the	form of a	
	brief (two- or three-word) descrip	otion and inclu	de the ra	ate for each.		1	1		
		BLO						BLOCK 2	
	CATEGORY OF SERVICE	RATE		ORY OF SER		RATE	-	ORY OF SERVICE	RATE
	Continuing Services:	47.00		ation: Non-res	idential			ed Content	86.3
	• Pay cable	17.00		tel, hotel				Favorites	14.0
	Pay cable—add'l channel			nmercial			Digital Digital		9.2
	Fire protection		-	/ cable	oppol		Digital		13.0
	•Burglar protection		-	/ cable-add'l ch	annei			Cable Pack	33.7
	Installation: Residential	70.05		e protection				te en Espanol	10.0
	First set	79.95		glar protection			HBO HBO M		20.0
	Additional set(s) EM radio (if concrete rate)	30.00		services:		40.00		ax ne/The Movie (15.9
	• FM radio (if separate rate)			connect		40.00			20.0
	• Converter			connect			Cinema	X	19.5
				let relocation			Starz	lov	9.9
			• Mov	ve to new addr	ess		Moviep	iex	5.0
								us Pack	7.0

	LEGAL NAME OF OWNER OF CABLE SYSTE			SYSTEM
Name	WAVE DIVISION HOLDINGS LLC			28
	PRIMARY TRANSMITTERS:	TELEVISION		
~	In General: In space G, identify every tele		ons and low power television static	ons)
G	carried by your cable system during the ac			
Primary	FCC rules and regulations in effect on Jun 76.59(d)(2) and (4), 76.61(e)(2) and (4), or	r 76.63 (referring to 76.61(e)(2) and (4))		
ransmitters: Television	substitute program basis, as explained in t Substitute Basis Stations: With respect t		able system on a substitute progra	~~
lelevision	basis under specific FCC rules, regulations	s, or authorizations:	, , , , , , , , , , , , , , , , , , , ,	ап
	• Do not list the station here in space G—k station was carried only on a substitute ba		ement and Program Log)—if the	
	• List the station here, and also in space I,	if the station was carried both on a sub		he
	basis. For further information concerning s Column 1: List each station's call sign. Do			ifv each
	multicast stream associated with a station			
	"WETA-2" as the same on the form. Column 2: Give the channel number the F	CC assigned to the television station for	or broadcasting over the air in its c	community
	of license. For example, WRC is channel	4 in Washington, D.C.	Ū.	
	Column 3: Indicate in each case whether educational station, by entering the letter "		· · · · · · · · · · · · · · · · · · ·	
	(for independent multicast), "E" (for noncor	mmercial educational), or "E-M" (for nor	ncommercial educational multicas	
	For the meaning of these terms, see page Column 4: Give the location of each station			y the
	FCC. For Mexican or Canadian stations, if		-	, ,
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	CBUT - CBC	2		VANCOUVER, BC
-	KBTC - PBS	28	E	
Rows as Necessary				
	KCPQ - FOX	13	N —	
	KCTS - PBS	9	E	SEATTLE, WA
	KCTSDT2 - PBS Kids	9.2	E	SEATTLE, WA
	KCTSDT3 - Create	9.3	E	SEATTLE, WA
	KFFV - MeTV	44.1	N	SEATTLE, WA
	KFFVDT 2- Movies!	44.2	N	SEATTLE, WA
	KING - NBC	5	N	SEATTLE, WA
	KINGDT2 - True Crime	5.2	Ν	SEATTLE, WA
	KINGDT3 - Quest	5.3	Ν	SEATTLE, WA
	KINGDT4 - THE365	5.4	N	SEATTLE, WA
	KIRO - CBS	7	N	SEATTLE, WA
	KIRODT2 - Cozi TV	7.2	N	
	KIRODT3 - Laff	7.3	N	SEATTLE, WA
	KIRODT4 - Telemundo	7.4	N	SEATTLE, WA
	КОМО - АВС	4	N	SEATTLE, WA
	KOMODT2 - Comet	4.3	N	SEATTLE, WA
	KOMODT3 - Charge!	4.2	N	SEATTLE, WA
	KONG - Independent	16	l	EVERETT, WA
	KSTW - Independent	11	I	TACOMA, WA
	KSTWDT2 - Decades	11.2	Ν	TACOMA, WA
	KTBW - TBN	20	N	SEATTLE, WA
	KUNS - CW	51.1	N	BELLEVUE, WA
	KUNSDT2 - TBD	51.2	N	
	KUNSDIZ - IBD			BELLEVUE, WA
	KUNODTO THE NEED		N	BELLEVUE, WA
	KUNSDT3 - The Nest	51.3		
	KVOS - Heroes & Icons	12.1	N	BELLINGHAM, WA

ccounting Period:	2024/2			FORM SA1-2E. PAGE 3.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM	И:		SYSTEM ID#
Name	WAVE DIVISION HOLDINGS LLC			28046
	PRIMARY TRANSMITTERS:	TELEVISION		
G Primary Transmitters: Television	In General: In space G, identify every televicarried by your cable system during the acc FCC rules and regulations in effect on June 76.59(d)(2) and (4), 76.61(e)(2) and (4), or substitute program basis, as explained in th Substitute Basis Stations: With respect to basis under specific FCC rules, regulations, - Do not list the station here in space G—bi station was carried only on a substitute basis - List the station here, and also in space I, if basis. For further information concerning su Column 1: List each station's call sign. Do on multicast stream associated with a station a "WETA-2" as the same on the form. Column 2: Give the channel number the FC of license. For example, WRC is channel 4 Column 3: Indicate in each case whether the educational station, by entering the letter "N (for independent multicast), "E" (for noncom For the meaning of these terms, see page (Column 4: Give the location of each station FCC. For Mexican or Canadian stations, if a	counting period except (1) stations ca 24, 1981, permitting the carriage of of 76.63 (referring to 76.61(e)(2) and (4) the next paragraph o any distant stations carried by your of or authorizations: ut do list it in space I (the Special Statistic is. If the station was carried both on a sult ubstitute basis stations, see page (v) of <i>not</i> report origination program service according to its over-the-air designation CC assigned to the television station f in Washington, D.C. he station is a network station, an indu " (for network), "N-M" (for network mumercial educational), or "E-M" (for network), in for U.S. stations, list the communit	rried only on a part-time basis under certain network programs [sections))]; and (2) certain stations carried on cable system on a substitute program tement and Program Log)—if the postitute basis and also on some othe of the general instructions as such as HBO, ESPN, etc. Identify e on. For example, report multistream for broadcasting over the air in its com ependent station, or a noncommercia ulticast), "I" (for independent), "I-M nocommercial educational multicast) aper SA1-2 form y to which the station is licensed by the	each munity
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	KWPX - ION	33		BELLEVUE, WA
	KZJO - MyNetwork TV	22	N	SEATTLE, WA

EGAL NAME OF								SYSTEM I 280
	t every radio s	tation ca	arried on a separate and discr nerally receivable by your cab					Н
eceivable if (1) on the basis of a cor detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: If ignal, indicate	it is carried by monitoring, to prmation abou rm. lentify the call tate whether t the radio stati this by placing	y the sys be recei t the Co sign of e he statio ion's sign g a check	I-Band FM Carriage: Under C tem whenever it is received a ved at the headend, with the s opyright Office regulations on t each station carried. on is AM or FM. nal was electronically process and and and and and and and and and and	t the system's he system's FM ante his point, see pa ed by the cable s	adend, and (2 mna, during co ge (v) of the g ystem as a se	!) it can ertain st eneral in eparate	be expected, ated intervals. nstructions in the. and discrete	Primary Transmitters Radio
		-	the community with which the			0.17		
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
						·	·	
							·	
							·	

Accounting Perio							FORM	SA1-2E. PAGE 5
Name	LEGAL NAME OF OWNER OF WAVE DIVISION HOLE							SYSTEM ID# 28046
	SUBSTITUTE CARRIAGI	E. SPECI	AL STATEME		G			
Substitute	In General: In space I, ident substitute basis during the a explanation of the programm	ify every no	nnetwork televi period, under sp	<i>sion program,</i> broadcast by pecific present and former F	a <i>distant</i> sta CC rules, reg	ulations, or au	uthorization	s. For a further
Carriage:	1. SPECIAL STATEMEN				<u> </u>			
Special Statement and	 During the accounting per 	riod, did yo	ur cable syster	n carry, on a substitute ba	sis, any noni	network te <u>l</u> ev	ision progr	am
Program Log	broadcast by a distant sta	tion?					YES	X NO
	Note: If your answer is "No	", leave the	e rest of this pa	ge blank. If your answer is	s "Yes," you ı	must complet	e the prog	ram
	log in block 2.		-		-	-		
	period, was broadcast by a under certain FCC rules, re Do not use general categor "NBA Basketball: 76ers vs. Column 2: If the prograr Column 3: Give the call Column 4: Give the broat the case of Mexican or Car Column 5: Give the mor first. Example: for May 7 gir Column 6: State the tim to the nearest five minutes. stated as "6:00–6:30 p.m."	of every no distant stat gulations, v ries like "mo Bulls." m was broa sign of the adcast stati addast stati addast stati addast stati addast stati addast stati addast stati extension of the adcast stati addast stati addast stati addast stati addast stati addast stati addast stati addast stati addast stati addast stati addast stati addast stati addast stati addast st	connetwork tele tion and that y or authorization povies" or "bask dcast live, entr station broadco on's location (f ons, if any, the v when your sy e substitute pr a program carr e listed program ions in effect d	vision program ("substitute our cable system substitut ns. See page (v) of the gen etball." List specific progra er "Yes." Otherwise enter " asting the substitute progra- the community to which the stem carried the substitute ogram was carried by your ried by a system from 6:01 n was substituted for progra uring the accounting perio	ed for the pro- neral instruct im titles, for e "No." am. e station is live station is id program. U r cable syste :15 p.m. to e ramming that d; enter the l	ogramming o ions for furthe example, "I Lo censed by the entified). se numerals, m. List the tin 5:28:30 p.m. s t your system letter "P" if the	f another s er informat ove Lucy" of e FCC or, i with the m nes accura should be was <i>requi</i> e listed pro	tation ion. or n ionth tely <i>red</i>
			E PROGRAM			N SUBSTITI		7. REASON FOR
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIN FROM —		DELETION
						_		
							•••••••••••••••••••••••••••••••••••••••	
							•••••••••••••••••••••••••••••••••••••••	
						_		
							•••••••••••••••••••••••••••••••••••••••	
						_		
						—		
						_		

Accounting Period:	2024/2			FORM	SA1-2E. PAGE 6
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: WAVE DIVISION HOLDINGS LLC				SYSTEM ID# 28046
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file a all amounts (gross receipts) paid to your cable system by subscribers for the (as identified in space E) during the accounting period. For a further explanat 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 s ion of how	secondary trans to compute thi	mission servi s amount, see	се
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 t informatio	han \$527,600 on.	\$263,800	
	BLOCK 1: GROSS RECEIPTS OF \$137	7,100 OR	LESS		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the roya accounting period is \$52.00 Line 1. Royalty fee for accounting period				ntl
	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 I	ines 1 and	12	·	
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	SS (but m	ore than \$137,	100)	
	1. Base amount under statutory formula	\$	263,800.00		
	2. Enter amount of gross receipts from space K	\$	257,577.67	_	
	3. Subtract line 2 from line 1	\$	6,222.33	_	
	4. Enter the amount of gross receipts from space K		\$ 2	257,577.67	_
	5. Enter the amount from line 3		\$	6,222.33	
	6. Subtract line 5 from line 4		\$ 2	251,355.34	_
	7. Multiply line 6 by .005 (enter figure here)			\$	1,256.78
	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		\$	1,256.78
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	3,800 (but	less than \$52	7,600)	
	1. 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) .		. \$	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	8		
	FILING FEE AND TOTAL REMITTANCE DU	E			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		. \$	1,256.78	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)		\$	20.00	.
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	1,276.78
	Important: Your remittance must be in the form of an electronic pay See page i of the general instructions in the paper SA1		-		rights!

Accounting Period:	2024/2									FORM	SA1-2E. PAGE 7.
Name	LEGAL NAME OF OWNE WAVE DIVISION HC										SYSTEM ID# 28046
M Channels	CHANNELS Instructions: You mu to its subscribers, and 1. Enter the total numb	(2) the cable system's	total num	mber of act		-			ns	22	
	system carried televi	sion broadcast station	s							33	
		per of activated channers ystem carried televisio ervices	n broadca							344	
N Individual to Be Contacted	INDIVIDUAL TO BE C we can contact about			FORMATIC	ON IS NEEDI	ED (Identify	an individual	to whom			
for Further Information	Name Bria	an Cioffi						Telephon	e 631-609-09	917	
momaton	(Num Prii	College Road E ber, street, rural route, apa nceton NJ, 08540 town, state, zip)	rtment, or su								
	Email	brian.cioffi@as	stound.co	om			Fax (op	otional)			
O Certification	CERTIFICATION (This I, the undersigned, here				-	ccordance	with Copyrigh	t Office regulation	ns)		
	(Owner othe	r than corporation or	partnersh	hip) I am th	e owner of th	e cable syste	em as identifie	ed in line 1 of spac	e B; or		
	in line 1	vner other than corpor of space B and that the	owner is n	not a corpo	ration or part	nership; or	-		-		
		partner) I am an officer of space B.	(if a corpo	oration) or a	a partner (if a	partnership)) of the legal e	ntity identified as o	owner of the cabl	le system	
	I have examined the si are true, complete, and [18 U.S.C., Section 100	correct to the best of m	-						ein		
			X	/s/ Pai	risa Saleh	ani			_		
					-		ve to certify thi , /s/ John Smit				
		Typed or printe	d name:	Parisa	a Salehan	i					
		Title: (Title of			President corporation or p		ller				
		Date:					2/2	8/2025			

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 telephon 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 i 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 th 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: 2024/2	FORM SA1-2E. PAGE 8
GAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
AVE DIVISION HOLDINGS LLC	2804
 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 add lowing sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for service of providing secondary transmissions of primary broadcast transmitters, the system shall no scribers and amounts collected from subscribers receiving secondary transmissions pursuant to set For more information on when to exclude these amounts, see the note on page (vii) of the general instruction located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmise of secondary transmise of gross receipts for secondary transmised by satellite carriers to satellite dish owners? NO 	the basic ot include sub- ection 119." Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	
INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or ur For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or ur	GA1-2 form.
You must complete this worksheet for those royalty payments submitted as a result of a late payment or un For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	GA1-2 form.
You must complete this worksheet for those royalty payments submitted as a result of a late payment or ur For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S	GA1-2 form.
You must complete this worksheet for those royalty payments submitted as a result of a late payment or un For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	GA1-2 form.
You must complete this worksheet for those royalty payments submitted as a result of a late payment or un For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmen
You must complete this worksheet for those royalty payments submitted as a result of a late payment or un For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	A1-2 form. Interest Assessmen
You must complete this worksheet for those royalty payments submitted as a result of a late payment or un For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	SA1-2 form. Interest Assessment days -
You must complete this worksheet for those royalty payments submitted as a result of a late payment or un For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	SA1-2 form. Interest Assessmen days 0.00274 -
You must complete this worksheet for those royalty payments submitted as a result of a late payment or un For an explanation of interest assessment, see page (viii) of the general instructions located in the paper S Line 1 Enter the amount of late payment or underpayment	SA1-2 form. Interest Assessmen days 0.00274 rest charge)
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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.