

Rightsholder's Account Statement as of 14 04 2004

| | | | |
|-----------------------------------|--------------------|-----------------------|---------------|
| RH No : 1 | Kind of Rights : 4 | Currency : 5 | Reference : 6 |
| Name : 2 | | | |
| Country : 3 | | | |
| Account Statement | | | |
| Payment : 7 | | | |
| Payment will be done as follows : | | | |
| Bank Details : | | Beneficiary Details : | |
| Account No : 8 | IBAN : 9 | Name : 17 | |
| Name : 10 | BIC : 12 | Address : 18 | |
| Code : 11 | | Zip : 19 | |
| Address : 13 | | City : 20 | |
| Zip : 14 | | Country : 21 | |
| City : 15 | | | |
| Country : 16 | | | |

Report : PAY_01

29 04 2004 12:04:31

1 / 1

Rightsholder's Account Statement as of 14 04 2004

| | | | |
|---|--------------------|--------------|---------------|
| RH No : 1 | Kind of Rights : 4 | Currency : 5 | Reference : 6 |
| Name : 2 | | | |
| Country : 3 | | | |
| Account Statement | | | |
| Closing Balance : 22 | | | |
| <i>As this amount is below the minimum payment threshold, it cannot currently be paid but will be included in a future remuneration for the same country.</i> | | | |

Report : PAY_01

29 04 2004 12:04:31

1 / 1

Each time AGICOA generates a payment and if you are an **independent Rightsholder**, you will receive the following documents :

- The **Account Statement** reports the global remuneration that has been paid to you. It is the sum of all total amounts that can be found on the accompanying Journal;
- The **Journal** lists each cable retransmission per country and per period included in the related payment. The Journal's Grand Total is reported on the accompanying Account Statement.

- 1 : RH No** : Rightsholder's number allocated by AGICOA at registration.
- 2 : Name** : Rightsholder's name or company's name as registered at AGICOA.
- 3 : Country** : ISO code of the country being paid.
- 4 : Kind of Rights** : Code of the type of rights being paid.
- 5 : Currency** : Currency of payment.
- 6 : Reference** : Payment reference code.

7 : Payment : Total amount paid.

Bank Details :

- 8 : Account No** : Beneficiary's bank details as registered at AGICOA.
- 9 : IBAN** : International Bank Account Number. Set to Yes (Y) when account number is an IBAN and to No (N) when it is not.
- 10 : Name** : Beneficiary's bank name as registered at AGICOA.
- 11 : Code** : Bank code.
- 12 : BIC** : Unique Bank Identification Code. Set to Yes (Y) when code number is a BIC and to No (N) when it is not.
- 13 : Address** : Beneficiary's bank address as registered at AGICOA.
- 14 : Zip** : Beneficiary's bank zip code as registered at AGICOA.
- 15 : City** : Beneficiary's bank city as registered at AGICOA.
- 16 : Country** : Beneficiary's bank country as registered at AGICOA.

Beneficiary Details :

- 17 : Name** : Beneficiary's name as registered at AGICOA.
- 18 : Address** : Beneficiary's address as registered at AGICOA.
- 19 : Zip** : Beneficiary's zip code as registered at AGICOA.
- 20 : City** : Beneficiary's city as registered at AGICOA.
- 21 : Country** : Beneficiary's country as registered at AGICOA.

22 : Closing Balance : Total amounts, less than or equal to the bank fees they would generate, are not currently paid and will be included in a future payment.

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------|----|--------------------------------|----|-------------------|----|---------------------------|----|--------------------|----|---------------------|----|-----|----|--------------|----|--------|----|---------|----|----------|----|------|----|----------|----|------|----|-----|----|-------|----|-------|----|
| RH No: 1 | | Name: 2 | | Country: 3 | | Kind of Rights: 4 | | Currency: 5 | | Reference: 6 | | | | | | | | | | | | | | | | | | | | | | | |
| Journal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Payments Section | | | | | | Broadcasts Section | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Op. Date | 23 | Rep. No | 24 | Amount | 25 | Type | 26 | % | 27 | FD | 28 | CRP | 29 | ISAN/Work No | 30 | Brd No | 31 | Channel | 32 | Brd Date | 33 | Time | 34 | Duration | 35 | Type | 36 | Lge | 37 | Claim | 38 | Title | 39 |
| Period : 40 | | Retrans. Type: CABLE 41 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |