THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011 If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2 Short Form

Return to: Library of Congress STATEMENT OF ACCOUNT FOR COPYRIGHT OFFICE USE ONLY Copyright Office for Secondary Transmissions by DATE RECEIVED AMOUNT Licensing Division Cable Systems (Short Form) 101 Independence Ave. SE Washington, DC 20557-6400 \$ (202) 707-8150 General instructions are at the 8/29/2022 end of this form [pages (i)-(vii)]. ALLOCATION NUMBER For courier deliveries, see page ii of the general instructions

Α	ACCOUNTING PERIOD COVERE	D BY THIS STATEMENT:						
Accounting Period	January 1-June 30, 2022							
B Owner	incorrect information and print or type the c Give the full legal name of the owner or rate title of the subsidiary, not that of the pa List any other name or names under w <i>If there were different owners during t</i> <u>a single statement of account and royalty</u> f	orrect information beside it. f the cable system. If the owner is a sub- rent corporation. hich the owner conducts the business of <i>he accounting period, only the owner on t</i>	the last day of the accounting period should subm ng period.	it _ 035350				
	LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM							
	Northland Cable Ventures,	LLC (Hillsboro)						
			03	3535020221				
				035350 2022/1				
	101 Stowart St. Suite 700							
	101 Stewart St, Suite 700 Seattle, WA 98101							
<u> </u>	INSTRUCTIONS: In line 1, give any bu	usiness or trade names used to ident	ify the business and operation of the system	unless these				
С	names already appear in space B. In li	ne 2, give the mailing address of the	system, if different from the address given i	n space B.				
System	1 1 Northland Cable Television							
	Mailing Address of Cable System 1500 North Beaton 2 (Number, street, rural route, apartment, or suite r Corsicana, TX 75110 (City, town, state, zp code)	:						
D Area	Instructions: List each separate community served by the cable system. A "community" is the same as a "community unit" as defined in FCC rules: "a separate and distinct community or municipal entitiy (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that list will serve as a form of system identification hereafter known as the "first community." Please use it as the first community on all future filings.							
Served	Note: Entities and properties such as h the identified city.	notels, apartments, condiminiums, or	mobile home parks should be reported in pa	aratheses below				
	CITY OR TOWN	STATE	CITY OR TOWN	STATE				
First	Hillsboro	TX						
Community	Hill Country	TX						

Privacy Act Notice	Section 111 of title 17 of the United States 0-1-		u	1				
form in order to pro numbers. By provid	cess your statement of account. PII is any persona ling PII, you are agreeing to the routine use of it to	al information that can be used to identify or tra establish and maintain a public record, which	personally identifying information (PII) requested on this ace an individual, such as name, address and telephone includes appearing in the Offce's public indexes and in 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.

Form SA1-2c Rev 04/2011

	LEGAL NAME OF OWNER OF CABLE SY	/STEM [.]		SYSTEM ID#
Name				035350
	Northland Cable Ventures, LL			
	CITY OR TOWN	STATE	CITY OR TOWN	STATE
D				
(continued)				
Area				
Served				
			-	
			-	
			-	
			-	
			-	
			-	
			-	
			-	

Form SA1-2c Rev 04/2011

Name	LEGAL NAME OF OWNER OF C	ABLE SYSTEM	:						TEM ID
Nume	Northland Cable Ventur	es, LLC (Hi	illsbo	ro)					03535
E	SECONDARY TRANSMISSION	SERVICE: S	UBSCR	BERS AND R	ATES				
E	In General: The information in s	•		•					
. .	system, that is, the retransmission								
Secondary Transmission			able) in space F, not here. All the facts you state must be those existing on the 30 or December 31, as the case may be).						
Service: Sub-	, , , , , , , , , , , , , , , , , , , ,	`		,	,	,	ble svstem	n. broken	
scribers and	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								
Rates	each category by counting the n	, umber of billin	gs in th	at category (the	number o	of persons or or	ganizations	s charged	
	separately for the particular serv								
	Rate: Give the standard rate of	-						-	
	unit in which it is generally billed category, but do not include disc			,	iny standa	ard rate variation	is within a	particular rate	
	Block 1: In the left-hand block				ries of sec	condary transmi	ssion servi	ce that cable	
	systems most commonly provide								
	that applies to your system. Not			-		-			
	categories, that person or entity						•		
	subscriber who pays extra for ca					d in the count ui	nder "Serv	ice 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								
	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.	BLOCK 2							
	DEC	BLOCK 1 BI					DLOOI	NO. OF	
	CATEGORY OF SERVICE	SUBSCRIB	ERS	RATE	CAT	EGORY OF SEI	RVICE	SUBSCRIBERS	RATI
	Residential:								
	Service to first set		21	25.00					
	 Service to additional set(s) 								
	 FM radio (if separate rate) 								
	Motel, hotel								
	Commercial		47	70.70					
	Converter								
	Residential								
	Non-residential								
									I
	SERVICES OTHER THAN SEC								
F	In General: Space F calls for rat	•	,		•				
•	not covered in space E, that is, t service for a single fee. There ar								
Services	furnished at cost or (2) services								
Other Than	amount of the charge and the ur		s usually	y billed. If any ra	ates are c	harged on a var	iable per-p	rogram basis,	
Secondary	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								
Transmissions: Rates	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							t were not	
	listed in block 1 and for which a	-	-						
	brief (two- or three-word) descrip								
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATE	GORY OF SER	VICE	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services:		Instal	ation: Non-res	idential				
	• Pay cable	25.50	• Mo	otel, hotel					
	Pay cable—add'l channel	16.00	• Co	ommercial					
	Fire protection		• Pa	y cable					
	•Burglar protection		• Pa	y cable-add'l ch	annel				
	Installation: Residential		• Fir	e protection					
	• First set	50.00	• Bu	rglar protection					I
	 Additional set(s) 	20.00	Other	services:					Ι
	• FM radio (if separate rate)		• Re	connect		75.00			
	• Converter		• Dis	sconnect					
			• OL	Itlet relocation		45.00			
				ove to new addr	ess	45.00			

		LEGAL NAME OF OWN	IER OF CABLE SYS	FORM SA	STEM ID				
Name		Northland Cable	Ventures, LLC	(Hillsboro)	03535				
	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 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 : 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 basis under specifc 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.								
	This may be different from the ch	basis. For further infor Column 1: List each Column 2: Give the n annel on which your cab;e s	rmation concerning station's call sign. I number of the chan system carried the	ubstitute basis and also on some othe g substitute basis stations, see page (v) of the general inst Do not report origination program services such as HBO, I nel on which the station's broadcasts are carried in its own station. Identify each multicast strean e, report multicast stream "WETA-2" as	ESPN, etc				
	the same on the form. Column 3: Indicate in each case whether the station is a network station, an independent station, or a none 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 Column 4: Give the location of each station. For U.S. stations, list the community to which the station is lice FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identifed								
	1. CALL SIGN	2. B'CAST CHANNEL	3. TYPE OF	6. LOCATION OF STATION					
	KYAO	NUMBER	STATION						
	KXAS	41	STATION N	FORT WORTH, TX					
	КХТХ	41 99		DALLAS, TX					
	KXTX KDFW-Fox	41 99 35		DALLAS, TX DALLAS, TX					
	KXTX KDFW-Fox KDFI-MyNetwork	41 99 35 36		DALLAS, TX DALLAS, TX DALLAS, TX					
	KXTX KDFW-Fox KDFI-MyNetwork KDAF-CW	41 99 35 36 32	N 	DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX					
	KXTX KDFW-Fox KDFI-MyNetwork KDAF-CW KTVT-CBS	41 99 35 36 32 11		DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX FORT WORTH, TX					
	KXTX KDFW-Fox KDFI-MyNetwork KDAF-CW KTVT-CBS KDTX-TBN	41 99 35 36 32 11 33	N 1 1 1 1 1 N 1	DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX FORT WORTH, TX DALLAS, TX					
	KXTX KDFW-Fox KDFI-MyNetwork KDAF-CW KTVT-CBS KDTX-TBN KERA-PBS	41 99 35 36 32 11 33 14	N 	DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX FORT WORTH, TX DALLAS, TX DALLAS, TX					
	KXTX KDFW-Fox KDFI-MyNetwork KDAF-CW KTVT-CBS KDTX-TBN	41 99 35 36 32 11 33	N 1 1 1 1 1 N 1	DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX FORT WORTH, TX DALLAS, TX					
	KXTX KDFW-Fox KDFI-MyNetwork KDAF-CW KTVT-CBS KDTX-TBN KERA-PBS KTXA-IND	41 99 35 36 32 11 33 14 18	N 1 1 1 1 1 N 1	DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX FORT WORTH, TX DALLAS, TX DALLAS, TX FORT WORTH, TX					
	KXTX KDFW-Fox KDFI-MyNetwork KDAF-CW KTVT-CBS KDTX-TBN KERA-PBS KTXA-IND	41 99 35 36 32 11 33 14 18	N 1 1 1 1 1 N 1	DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX FORT WORTH, TX DALLAS, TX DALLAS, TX FORT WORTH, TX					
	KXTX KDFW-Fox KDFI-MyNetwork KDAF-CW KTVT-CBS KDTX-TBN KERA-PBS KTXA-IND	41 99 35 36 32 11 33 14 18	N 1 1 1 1 1 N 1	DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX FORT WORTH, TX DALLAS, TX DALLAS, TX FORT WORTH, TX					
	KXTX KDFW-Fox KDFI-MyNetwork KDAF-CW KTVT-CBS KDTX-TBN KERA-PBS KTXA-IND	41 99 35 36 32 11 33 14 18	N 1 1 1 1 1 N 1	DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX DALLAS, TX FORT WORTH, TX DALLAS, TX DALLAS, TX FORT WORTH, TX					

ACCOUNTING PERIOD: 2022/1

ORM SA1-2. F EGAL NAME OF Iorthland C	F OWNER OF (YSTEM: .C (Hillsboro)				SYSTEM ID# 035350	Name
	t every radio s	tation ca	rried on a separate and discre					н
ll-band basis w	vhose signals	were "ge	nerally receivable" by your ca	ble system during	the accounting	ng perio	d.	
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 the Copyright Office regulations on this point, see page (v) of the general instructions. 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.								Primary Transmitters Radio
Column 4: G	live the station	n's locatio	the community with which the			C or, in tl	ne case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		3/0	LOCATION OF STATION			3/0	LOCATION OF STATION	
	·							

			11		

	LEGAL NAME OF OWNER OF	CABLE SYS	TEM:				SYSTEM ID#		
Name	Northland Cable Ventu	ires, LLC	(Hillsboro)			035350			
	SUBSTITUTE CARRIAGI	-	-		-				
•	In General: In space I, identi substitute basis during the ac								
Substitute	explanation of the programm								
Carriage:	1. SPECIAL STATEMEN		RNING SUBS	TITUTE CARRIAGE					
Special Statement and	 During the accounting per 		ur cable syster	n carry, on a substitute ba	isis, any non				
Program Log	broadcast by a distant sta				"D ()"		ХNо		
	Note: If your answer is "No log in block 2.	", leave the	e rest of this pa	ige blank. If your answer i	s "Yes,″ you	must complete the progr	am		
	2. LOG OF SUBSTITUTE			ata lina. I laa ah husuistisu		and the state of the size of t	i		
	In General: List each substitute program on a separate line. Use abbreviations wherever possible, if their meaning is clear. If you need more space, please attach additional pages.								
	Column 1: Give the title of every nonnetwork television program (substitute program) that, during the accounting								
	period, was broadcast by a distant station and that your cable system substituted for the programming of another station under certain FCC rules, regulations, or authorizations. See page (v) of the general instructions for further information.								
	Do not use general categor								
	"NBA Basketball: 76ers vs.		denet live and	an "Maa " Othernuise antan	"NI-"				
				er "Yes." Otherwise enter asting the substitute prog					
	Column 4: Give the broa	adcast stati	on's location (the community to which th	e station is l		ı		
	the case of Mexican or Car Column 5: Give the mor			e community with which the stem carried the substitute			onth		
	first. Example: for May 7 giv	ve "5/7."							
	Column 6: State the tim to the nearest five minutes.	es when th	e substitute pr	ogram was carried by you	r cable syste	em. List the times accurates accurates accurates accurates accurate accurate accurates	ely		
	stated as "6:00–6:30 p.m."	Example.	a program can	ned by a system norm 0.0	i. i5 p.iii. io i	5.26.30 p.m. should be			
				n was substituted for prog			ed		
	to delete under FCC rules a gram was substituted for pr						1		
	effect on October 19, 1976.		, , ,	·		0			
					WH	EN SUBSTITUTE			
	SI	JBSTITUT	E PROGRAM	1		AGE OCCURRED	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. TIMES FROM — TO	DELETION		
			ON LE CICIT						
						<u> </u>			
						<mark></mark>			
						_			
						_			
						_			
						_			

FORM SA1-2. F	AGE 6.		
	LEGAL NAME OF OWNER OF CABLE SYSTEM: Northland Cable Ventures, LLC (Hillsboro)	SYSTEM ID# 035350	Name
	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. Enter the to all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary transmission se (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, page (vii) of the general instructions. 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.	ervice	K Gross Receipts
Instructions: • • •	ROYALTY FEE 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 \$263,80(Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,60(if the general instructions for more information.		L Copyright Royalty Fee
	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-r accounting period is \$52.00	nontr	
	Line 1. Royalty fee for accounting period	52.00	
	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 lines 1 and 2 \$ BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100)	52.00	
	1. Base amount under statutory formula \$ 263,800.00 2. Enter amount of gross receipts from space K		
	3. Subtract line 2 from line 1		
	4. Enter the amount of gross receipts from space K		
	5. Enter the amount from line 3		
	6. Subtract line 5 from line 4		
	7. Multiply line 6 by .005 (enter figure here)		
	8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
	9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)		
	1. Enter the amount of gross receipts from space K		
	2. Base amount under statutory formula		
	3. Subtract line 2 from line 1		
	4. Multiply line 3 by .01		
	5. Royalty due on the first \$263,800 of gross recepits (under statutory formula) \$ 1,319.0	00	
	6. Interest charge. Enter the amount from line 4, space Q, page 8	00	
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
	FILING FEE AND TOTAL REMITTANCE DUE		
Filing Foo			
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)	52.00	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations)	15.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3	67.00	
	EFT Trace # or TRANSACTION ID # Not A	vailable	
	See page i of the general instructions in the paper SA1-2 form and the Excel instructions tab for more in	nformation.	

ACCOUNTING FER	FORM SA1-2	. PAGE 7.
Name		FEM ID#
Name	Northland Cable Ventures, LLC (Hillsboro)	035350
	CHANNELS	
М		
141	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.	
Channels	to its subscribers and (2) the cable system's total number of activated channels, during the accounting period.	
enanioio	1. Enter the total number of channels on which the cable	
	system carried television broadcast stations	
	2. Enter the total number of activated channels	
	on which the cable system carried television broadcast stations 74	
	and nonbroadcast services	
N	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: (Identify an individual to whom	
IN	we can write or call about this statement of account.)	
Individual to		
Be Contacted		
for Further	Name Marie Censoplano Telephone 914-235-8313	
Information		
	Address 4 International Dr Suite 330	
	(Number, street, rural route, apartment, or suite number)	
	Rye Brook, NY 10573	
	(City, town, state, zip)	
	Email (optional) marie.censoplano@vyvebb.com Fax (optional) 914-234-8363	
	CERTIFICATION (This statement of account must be certifed and signed in accordance with Copyright Offce regulations,	
0	as explained in the general instructions.)	
Certifcation	I, the undersigned, hereby certify that (Check one, but only one, of the boxes.)	
Certification		
	(Owner other than corporation or partnership) I am the owner of the cable system as identifed in line 1 of space B; or	
	(Agent of owner other than corporation or partnership) I am the duly authorized agent of the owner of the cable system as identified 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 owner of the cable syst in line 1 of space B.	em
	• I have examined the statement of account and hereby declare under penalty of law that all statements of fact contained herein	
	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)]	
	Handwritten signature: /s/ Daniel J White	
	Typed or printed name: Daniel J White	
	Title: SVP Financial Planning	
	(Title of official position held in corporation or partnership)	
	Date: 8/22/2022	

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 effects 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.

LEGAL NAME OF OWNER OF CABLE SYS	ſEM:	SYSTEM	Nomo
Northland Cable Ventures, LLC	(Hillsboro)	0353	350 Name
The Satellite Home Viewer Act of 198 lowing sentence: "In determining the total numb service of providing secondar scribers and amounts collecte For more information on when to excl	d from subscribers receiving secondary ude these amounts, see the note on pag cable system exclude any amounts of gro), of the Copyright Act by adding the fol- s paid to the cable system for the basic asmitters, the system shall not include sub- transmissions pursuant to section 119."	P Special Statement Concerning Gross Receipts Exclusion
	the satellite carrier(s) below	\$	
Name Mailing Address	Name Mailing Ad	dress	
INTEREST ASSESSMENTS			
You must complete this worksheet for	those royalty payments submitted as a nent, see page (viii) of the general instru	result of a late payment or underpayment. actions.	Q
Line 1 Enter the amount of late payr	nent or underpayment	x	Interest Assessment
Line 2 Multiply line 1 by the interest	rate* and enter the sum here		
		x days	
Line 3 Multiply line 2 by the number	of days late and enter the sum here	*	
Line 4 Multiply line 3 by 0.00274** e space L, (page 7)	nter here and on line 3, block 4,	\$ (interest charge)	
	ck on <i>www.copyright.gov/licensing/inter</i> : (202) 707-8150 or licensing@loc.gov.	est-rate.pdf. For further assistance please	
** This is the decimal equivalent of	f 1/365, which is the interest assessmen	t for one day late.	
	covering a statement of account already nmunity served, ID number, and accoun	submitted to the Copyright Offce, please ting 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 t	ne United States Code authorizes the Copyright O	ffce to collect the personally identifying information (PII) req	uested 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 Offce's public indexes and in search reports prepared for the public. The effects 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.