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

Return completed workbook FOR COPYRIGHT OFFICE USE ONLY by email to: STATEMENT OF ACCOUNT for Secondary Transmissions by DATE RECEIVED AMOUNT coplicsoa@loc.gov Cable Systems (Short Form) \$ For additional information, contact the U.S. Copyright General instructions are located Office Licensing Division at: Tel: (202) 707-8150 in the first tab of this workbook ALLOCATION NUMBER 8/28/2023

Α	ACCO	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
Accounting		Barcode Data Filing Period (optional - see instructions)
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.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		MCC Georgia, LLC (Hazlehurst, GA)
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM ONE MEDIACOM WAY
		(Number, street, rural route, apartment, or suite number)
		MEDIACOM PARK, NY 10918 (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 s already 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.

Accounting Period:	2023/1	
	LEGAL NAME OF OWNER OF CABLE SYSTEM:	FORM SA1-2E. PAGE 1b. SYSTEM ID#
Name	MCC Georgia, LLC (Hazlehurst, GA)	5078
D	Instructions: List each separate community served by the cable system. A "community separate and distinct community or municipal entity (including unincorporated community 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. Note: Entities and properties such as hotels, apartments, condominiums, or mobile ho	" is the same as a "community unit" as defined in FCC rules: "a unities within unincorporated areas and including single, discrete e as a form of system identification hereafter known as the "first
Served	city.	
	CITY OR TOWN	STATE
First Community	Hazlehurst	GA
connunty	Jeff Davis County Lumber City	GA GA
Add Rows as Necessary		

	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:						FORM SA1	TEM ID
Name	MCC Georgia, LLC (Haz	lehurst, GA)						507
_	SECONDARY TRANSMISSION	SERVICE: SU	BSCRI	BERS AND RAT	TES				
E	In General: The information in sp					r transmission s	ervice of th	ie cable	
	system, that is, the retransmission								
Secondary Transmission	about other services (including p last day of the accounting period	, , ,	,		,		hose existii	ng on the	
Service: Sub-	Number of Subscribers: Both						le system,	broken	
scribers and	down by categories of secondary	r transmission	service	. In general, you	can comp	oute the numbe	r of subscri	bers in	
Rates	each category by counting the nu							charged	
	separately for the particular servi Rate: Give the standard rate cl							e and the	
	unit in which it is generally billed.	-	-	•			-		
	category, but do not include disc	· ·	,		, otaniaan				
	Block 1: In the left-hand block	•		•					
	systems most commonly provide that applies to your system. Note								
	categories, that person or entity			-		-			
	subscriber who pays extra for ca						•		
	first set" and would be counted o	nce again und	er "Serv	vice to additiona	set(s)."				
	Block 2: If your cable system h	-		•					
	printed in block 1 (for example, ti with the number of subscribers a						,.		
	sufficient.	nu rates, in the	e ngnt-n	IATIU DIOCK. A IW	J- OF UNITED				
	BLC	DCK 1					BLOCK		
	CATEGORY OF SERVICE	NO. OF SUBSCRIB		RATE	CATI	EGORY OF SE	RVICE	NO. OF SUBSCRIBERS	RATE
	Residential:						-		
	Service to first set		390	40.49-74.49					
	 Service to additional set(s) 								1
	• FM radio (if separate rate)								1
	Motel, hotel								1
	Commercial		0	40.49-74.49					1
	Converter								1
	Residential								1
	Non-residential								
	SERVICES OTHER THAN SECO		NSMIS	SIONS: RATES					
F	In General: Space F calls for rat	•	,		•	• •			
I	not covered in space E, that is, the service for a single fee. There are								
Services	furnished at cost or (2) services	•					0 ()		
Other Than	amount of the charge and the un								
Secondary	enter only the letters "PP" in the								
ransmissions:	Block 1: Give the standard rate Block 2: List any services that			•				voro pot	
Rates	listed in block 1 and for which a s				•	0.			
	brief (two- or three-word) descrip								
		BLO	CK 1					BLOCK 2	
	CATEGORY OF SERVICE	RATE	CATE	GORY OF SER	/ICE	RATE	CATEG	ORY OF SERVICE	RATE
	Continuing Services:		Install	ation: Non-resi	dential				
	• Pay cable	PP	• Mo	otel, hotel			Family	Cable	105.0
	Pay cable—add'l channel	PP		mmercial					
	Fire protection		•Pa	y cable					ļ
	•Burglar protection		•Pa	y cable-add'l ch	annel				
	Installation: Residential		• Fir	e protection					
	• First set	109.99	• Bu	rglar protection					
	 Additional set(s) 	49.00		services:					
			. Po			49.00			
	• FM radio (if separate rate)		-110	connect		+5.00			
	• FM radio (if separate rate) • Converter	10.50		connect sconnect					
	,	10.50	• Dis			49.00			

	LEGAL NAME OF OWNER OF	CABLE SYSTEM:		SYSTEM
Name	MCC Georgia, LLC (H	azlehurst. GA)		50
	PRIMARY TRANSMITTERS:			
G Primary	carried by your cable system FCC rules and regulations in	ntify every television station (including n during the accounting period, <i>except</i> n effect on June 24, 1981, permitting th)(2) and (4), or 76.63 (referring to 76.6 ⁻	(1) stations carried only on a part-time carriage of certain network progra	me basis under ms [sections
Transmitters:	substitute program basis, as	s explained in the next paragraph.		
Television	basis under specific FCC ru	With respect to any distant stations ca les, regulations, or authorizations: in space G—but do list it in space I (th a substitute basis.		
	basis. For further informatio Column 1: List each station	Iso in space I, if the station was carried n concerning substitute basis stations, 's call sign. <i>Do not</i> report origination p with a station according to its over-the	see page (v) of the general instructi rogram services such as HBO, ESP	ons. N, etc. Identify each
	"WETA-2" as the same on t Column 2: Give the channe of license. For example, W	he form. I number the FCC assigned to the tele RC is channel 4 in Washington, D.C.	vision station for broadcasting over	the air in its community
	educational station, by enter (for independent multicast), For the meaning of these te Column 4: Give the location	case whether the station is a network s ring the letter "N" (for network), "N-M" (i "E" (for noncommercial educational), o rms, see page (iv) of the general instru n of each station. For U.S. stations, list lian stations, if any, give the name of th	for network multicast), "I" (for indepe or "E-M" (for noncommercial education in the paper SA1-2 form. the community to which the station	ndent), "I-M" onal multicast). is licensed by the
	1. CALL SIGN	2. B'CAST CHANNEL NUMBER	3. TYPE OF STATION	4. LOCATION OF STATION
	I. CALL SIGN	2. D CAST CHANNEL NOMBER	3. TIPE OF STATION	4. LOCATION OF STATION
	WALB NBC	10	N	Albany, GA
	WALB-DT3 Bounce TV	10.3	I-M	Albany, GA
d Rows as Necessary	WGNM/WGNM(HD) CTN	45	I	MACON, GA
	WJCL/WJCL(HD) ABC	22	N	Savannah, GA
	WJCL-DT2 MeTV	22.2	I-M	Savannah, GA
	WSAV/WSAV(HD) NBC	39	Ν	Savannah, GA
	WSAV/WSAV DT2 CW (HD)	39.2	I-M	Savannah, GA
	WSAV DT3 Court TV	39.3	I-M	Savannah, GA
	WSAV-DT4 Laff	39.4	I-M	Savannah, GA
	WTGS/WTGS(HD) FOX	28	I	hardeeville, SC
	WTGS-DT2 COMET	28.2	I-M	hardeeville, SC
	W100-D12 COML1			
	WTCS DT2 Antonno TV			
	WTGS-DT3 Antenna TV	28.3	I-M	hardeeville, SC
	WTGS-DT4 TBD	28.3 28.4	I-M I-M	hardeeville, SC hardeeville, SC
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS	28.3	I-M	hardeeville, SC hardeeville, SC Savannah, GA
	WTGS-DT4 TBD	28.3 28.4	I-M I-M	hardeeville, SC hardeeville, SC
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS	28.3 28.4 11	I-M I-M N	hardeeville, SC hardeeville, SC Savannah, GA
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS WTOC-DT2 Bounce TV	28.3 28.4 11 11.2	I-M I-M N I-M	hardeeville, SC hardeeville, SC Savannah, GA Savannah, GA
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS WTOC-DT2 Bounce TV	28.3 28.4 11 11.2	I-M I-M N I-M	hardeeville, SC hardeeville, SC Savannah, GA Savannah, GA
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS WTOC-DT2 Bounce TV	28.3 28.4 11 11.2	I-M I-M N I-M	hardeeville, SC hardeeville, SC Savannah, GA Savannah, GA
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS WTOC-DT2 Bounce TV	28.3 28.4 11 11.2	I-M I-M N I-M	hardeeville, SC hardeeville, SC Savannah, GA Savannah, GA
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS WTOC-DT2 Bounce TV	28.3 28.4 11 11.2	I-M I-M N I-M	hardeeville, SC hardeeville, SC Savannah, GA Savannah, GA
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS WTOC-DT2 Bounce TV	28.3 28.4 11 11.2	I-M I-M N I-M	hardeeville, SC hardeeville, SC Savannah, GA Savannah, GA
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS WTOC-DT2 Bounce TV	28.3 28.4 11 11.2	I-M I-M N I-M	hardeeville, SC hardeeville, SC Savannah, GA Savannah, GA
	WTGS-DT4 TBD WTOC/WTOC(HD) CBS WTOC-DT2 Bounce TV	28.3 28.4 11 11.2	I-M I-M N I-M	hardeeville, SC hardeeville, SC Savannah, GA Savannah, GA

Accounting P	eriod: 2023	/1					FORI	M SA1-2E. PAGE 4
								SYSTEM ID
MCC Georgi	a, LLC (Ha	zienurs	st, GA)					507
	t every radio s	tation ca	rried on a separate and discre nerally receivable by your cabl					н
Special Instruct receivable if (1) on the basis of For detailed info paper SA1-2 for Column 1: lo Column 2: S Column 3: lf signal, indicate Column 4: G	tions Conce it is carried by monitoring, to prmation about rm. lentify the call tate whether t the radio stat this by placing sive the station	rning All y the sys be recei t the Co sign of e he statio ion's sigr g a check n's locatio	-Band FM Carriage: Under C tem whenever it is received at ved at the headend, with the s pyright Office regulations on th each station carried. n is AM or FM. hal was electronically processes (mark in the "S/D" column. on (the community to which the the community with which the	opyright Office re the system's hea system's FM ante his point, see pag ed by the cable sy e station is licens	gulations, an adend, and (2) nna, during ce ye (v) of the ge ystem as a se ed by the FCC	FM sign) it can b ertain sta eneral in parate a	al is generally be expected, ated intervals. structions in the. nd discrete	Primary Transmitters: Radio
		, u <u>,</u> ,						
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
		+						
		+						
		+						
		_						
		_						
		+						
		_						
		+						
		 						

Accounting Perio	d: 2023/1					FC	RM SA1-2E. PAGE 5.
	LEGAL NAME OF OWNER OF	CABLE SYST	FEM:				SYSTEM ID#
Name	MCC Georgia, LLC (Ha	zlehurst,	GA)				5078
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOO	3		
Substitute	In General: In space I, identi <i>substitute basis</i> during the ad explanation of the programm	counting pe	eriod, under spe	cific present and former FC	CC rules, regula	ations, or authorizations	. For a further
Carriage:	1. SPECIAL STATEMENT	-			v	•••	
Special	During the accounting per	-			sis anv nonne	twork television progra	am
Statement and	broadcast by a distant stat			ourly, on a substitute but			
Program Log	broaucast by a distant star					YES	NO
	Note: If your answer is "No"	', leave the	rest of this pag	je blank. If your answer is	"Yes," you mi	ust complete the progr	am
	log in block 2. 2. LOG OF SUBSTITUTE		MS				
	In General: List each subst clear. If you need more spa	itute progra	am on a separa		wherever pos	ssible, if their meaning	is
	Column 1: Give the title				program") that	at, during the accountir	ng
	period, was broadcast by a						
	under certain FCC rules, re						
	Do not use general categor		vies" or "baske	etball." List specific progra	m titles, for ex	ample, "I Love Lucy" o	or
	"NBA Basketball: 76ers vs. Column 2: If the program	n was broa					
	Column 3: Give the call Column 4: Give the broa					ensed by the FCC or in	h
	the case of Mexican or Can						•
	Column 5: Give the mon	ith and day		tem carried the substitute			onth
	first. Example: for May 7 giv						
	Column 6: State the time						tely
	to the nearest five minutes. stated as "6:00–6:30 p.m."	Example: a	a program carri	ed by a system from 6:01	:15 p.m. to 6:2	28:30 p.m. snould be	
		er "R" if the	listed program	was substituted for progr	amming that v	our system was requi	red
	to delete under FCC rules a						
	was substituted for program		/our system wa	s permitted to delete und	er FCC rules a	and regulations in	-
	effect on October 19, 1976.						
	s	UBSTITU	TE PROGRAM			EN SUBSTITUTE	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
		100 01 110	ONLE CIGIT				
						_	
						_	
						_	
						_	

Accounting Period:	2023/1			FORM S	A1-2E. PAGE 6.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: MCC Georgia, LLC (Hazlehurst, GA)			S	YSTEM ID# 5078
K Gross Receipts	GROSS RECEIPTS Instructions: The figure you give in this space determines the form you file and the all amounts (gross receipts) paid to your cable system by subscribers for the syste (as identified in space E) during the accounting period. For a further explanation of 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 receipt	em's seco f how to o	ondary transmi compute this a	ssion service mount, see	4,545.38 oss receipts)
L Copyright Royalty Fee	COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: • Complete block 1, block 2, or block 3. • Use block 1 if the amount of gross receipts in space K is \$137,100 or less • Use block 2 if the amount of gross receipts in space K is more than \$137,100 but l • Use block 3 if the amount of gross receipts in space K is more than \$263,800 but l See page (vi) of the general instructions located in the paper SA1-2 form for more inform	less than mation.	\$527,600	63,800	
	BLOCK 1: GROSS RECEIPTS OF \$137,10	JU UR LI	200		
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee accounting period is \$52.00	that you	must pay for thi	is six-month	
	Line 1. Royalty fee for accounting period				
	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	1 and 2 .			
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (_
	1. Base amount under statutory formula		263,800.00		
	2. Enter amount of gross receipts from space K		184,545.38		
	3. Subtract line 2 from line 1		79,254.62		
	4. Enter the amount of gross receipts from space K	<u>-</u>	\$ 1	84,545.38	
	5. Enter the amount from line 3		\$	79,254.62	
	6. Subtract line 5 from line 4	_	\$ 1	05,290.76	
	7. Multiply line 6 by .005 (enter figure here)			\$	526.45
	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	d 8 8 b		\$	526.45
	BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,80	00 (but le	ess than \$527	,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	-			
	7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, a	-			
		and 0			
	FILING FEE AND TOTAL REMITTANCE DUE				
Filing Fee and Total Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)	····· <u>-</u>	\$	526.45	
Due	2. Filing Fee (See the instructions for more information on filing fee calculations) \ldots	· · · · · · -	\$	20.00	
	3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	546.45
	Important: Your remittance must be in the form of an electronic paymen See page i of the general instructions in the paper SA1-2 fo				nts!

Accounting Period:	2023/1					FORM SA1-2E. PAGE 7
Name		WNER OF CABLE SYSTEM: LLC (Hazlehurst, GA)				SYSTEM ID# 5078
M Channels	to its subscriber 1. Enter the tota system carrie 2. Enter the tota on which the	s, and (2) the cable system's I number of channels on wh d television broadcast statio I number of activated chann cable system carried televis	's total numb nich the cabl ons nels sion broadca		counting period.	23 67
N Individual to		BE CONTACTED IF FUR		RMATION IS NEEDED (Identify an ind	ividual to whom	
Be Contacted for Further Information	Name	Kenneth J. Kohrs			Telephone 845-4	443-2762
	Address	One Mediacom Way (Number, street, rural route, apa Mediacom Park, NY (City, town, state, zip)	artment, or suite	e number)		
	Email	Copyrights@n	nediacomc	c.com	Fax (optional	
		This statement of account n	must be cert	ified and signed in accordance with Co	pyright Office regulations)	
O Certification	(Owner X (Agent (Office	of owner other than corpor in line 1 of space B and that t er or partner) I am an officer in line 1 of space B. the statement of account and e, and correct to the best of r	partnership ration or pa the owner is (if a corpora d hereby dec	<i>v one</i> , of the boxes.) o) I am the owner of the cable system as rtnership) I am the duly authorized ager not a corporation or partnership; or tion) or a partner (if a partnership) of the lare under penalty of law that all stateme ge, information, and belief, and are made	t of the owner of the cable system a legal entity identified as owner of the nts of fact contained herein	
		Typed or printe	Enter an e Enter sign ed name:	/s/ Kenneth J. Kohrs electronic signature on the line above to ce ature using an "/s/ signature" (e.g., /s/ Jol Kenneth J. Kohrs	nn Smith)	
		Title:	·····	Vice President, Financial Re position held in corporation or partnership)	porting	
		Date:			8/3/2023	

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	FORM SA1-2E. PAGE 8
AL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID
C Georgia, LLC (Hazlehurst, GA)	5078
 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? NO 	P Special Statement Concerning Gross Receipts Exclusion
YES. Enter the total here and list the satellite carrier(s) below	
Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment.	0
For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form.	Interest Assessment
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	Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
	Interest Assessment
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
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