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					
03/01/2024	\$ 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	ACCOU	NTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))								
	20	Period 1 = January 1 - June 30 Period 2 = July 1 - December 31								
		20232 Barcode Data Filing Period (optional - see instructions)								
Accounting Period										
В	Giv	structions:  ve the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate e of the subsidiary, not that of the parent corporation.								
Owner	Lis	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.								
	Ch	eck here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.								
	<u> </u>	FOAL NAME OF OWNERWALLING ADDRESS OF OARLE OVOTEN								
		EGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM								
		ogeco US (Delmar), LLC								
	В	JSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)								
	M	AILING ADDRESS OF OWNER OF CABLE SYSTEM								
		Batterymarch Park, Suite 205 Imber, street, rural route, apartment, or suite number)								
	Q	uincy, MA 02169 y, town, state, zip)								
С		CTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these ready appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B								
System	, IDI	ENTIFICATION OF CABLE SYSTEM:								
	1 c	ogeco US, LLC								
	MA	AILING ADDRESS OF CABLE SYSTEM:								
	2 (Ni	30 Drummer Drive imber, street, rural route, apartment, or suite number)								
	G	rasonville, MD 21638 y, 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 suffciency of the fling, a determination that would be made by a court of law.

		FORM SA1-2E. PAG							
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM							
Name	Cogeco US (Delmar), LLC 265								
	Instructions: List each separate community served by the cable system	n. A "community" is the same as a "community unit" as defined in FCC rule							
D	"a separate and distinct community or municipal entity (including unincorporated communities within unincorporated areas and including single, discrete unincorporated areas)." 47 C.F.R. 76.5(dd). The first community that you 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.								
Area		ms, or mobile home parks should be reported in parentheses below the							
Served	identified city.								
	CITY OR TOWN	STATE							
First	Town of Middletown	DE							
Community	Town of Townsend	DE							
	Town of Odessa	DE							
d Rows as Necessary	City of Deleware City	DE							
,	New Castle County	DE							
	New Castle County, St. Georges	DE							
	Kent County (Smyrna/Clayton)	DE							
	Perry Point	MD							
	City of Chesapeake City	MD							
	Middletown (Village Brook)	DE							

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 26504

## Cogeco US (Delmar), LLC

## Ε

#### Secondary Transmission Service: Subscribers and Rates

#### SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

**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	RATE	CATEGORY OF SERVICE	NO. OF	RATE	
	SUBSCRIBERS	RAIE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE	
Residential:						
<ul> <li>Service to first set</li> </ul>	1,495	39.99	Entertainment	1,279	69.98	
<ul> <li>Service to additional set(s)</li> </ul>			Variety	53	#####	
<ul> <li>FM radio (if separate rate)</li> </ul>			Family	-	#####	
Motel, hotel	0	39.99				
Commercial	73	39.99				
Converter						
Residential		4.99-19.99				
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 2			
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE RATE
Continuing Services:		Installation: Non-residential		
Pay cable	1.99-19.99	Motel, hotel		
<ul> <li>Pay cable—add'l channel</li> </ul>		Commercial		
Fire protection		• Pay cable		
Burglar protection		<ul> <li>Pay cable-add'l channel</li> </ul>		
Installation: Residential		Fire protection		
• First set	50.00	Burglar protection		
<ul> <li>Additional set(s)</li> </ul>	40.00	Other services:		
<ul> <li>FM radio (if separate rate)</li> </ul>		Reconnect	50.00	
Converter		Disconnect		
		<ul> <li>Outlet relocation</li> </ul>	40.00	
		<ul> <li>Move to new address</li> </ul>	40.00	

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

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 26504

Cogeco US (Delmar), LLC

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 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
KYW	3		Philadelphia, PA
WBAL	11	N	Baltimore, MD
WBFF	1	N	Baltimore, MD
WCAU	10	N	Philadelphia, PA
WHYY	7	E	Wilmington, DE
WJZ	13	N	Baltimore, MD
WMAR	2	N	Baltimore, MD
WMPT	42	E	Annapolis, MD
WNUV	17	l	Baltimore, MD
WPHL	4	l	Philadelphia, PA
WPPX	8	N	Philadelphia, PA
WPSG	6	l	Philadelphia, PA
WPVI	6	N	Philadelphia, PA
WTXF	9	<u>l</u>	Philadelphia, PA
WACP	22	<u> </u>	Atlantic City, NJ
KJWP/WDPN	69	<u> </u>	Philadelphia, PA
WNUV (Comet)	17.3	<u> </u>	Baltimore, MD
WNUV (Stadium)	17.4	<u> </u>	Baltimore, MD
WPHL GRIT	4.3	l	Philadelphia, PA
WPHL Antenna TV	4.2	<u> </u>	Philadelphia, PA
WPHL Comet	4.4	<u> </u>	Philadelphia, PA
WNUV Antenna TV	17.2	<u> </u>	Philadelphia, PA

Accounting Period: 2023/2	FORM SA1-2E. PAGE 4
---------------------------	---------------------

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

Cogeco US (Delmar), LLC

26504

#### 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
		<del> </del>				 	
		ļ				 	
		ļ					
		[				[	
		<del> </del>					
		<del> </del>					
		<del> </del>					
		<del> </del>					
		<b> </b>					
		ļ					
		ļ					
		[				[	
		<del></del>					
		<del> </del>					
		<del> </del>					
		<del> </del>					
		<del> </del>					
		<b></b>					
		ļ					
		ļ				 	
		l					
		<del> </del>					
		<b></b>					
		ļ					
		<u> </u>				ļ	
		L				L	

Accounting Perio	.d. 2022/2						FOR	M SA1-2E. PAGE 5.	
Accounting Perio	LEGAL NAME OF OWNER OF	CABLE SYS	STEM:				FUR	SYSTEM ID#	
Name	Cogeco US (Delmar),	LLC						26504	
Substitute Carriage: Special Statement and Program Log	SUBSTITUTE CARRIAGE: SPECIAL STATEMENT AND PROGRAM LOG  In General: In space I, identify every nonnetwork television program, broadcast by a distant station, that your cable system carried on a substitute basis during the accounting period, under specific present and former FCC rules, regulations, or authorizations. For a further explanation of the programming that must be included in this log, see page (v) of the general instructions in the paper SA1-2 form.  1. SPECIAL STATEMENT CONCERNING SUBSTITUTE CARRIAGE  • During the accounting period, did your cable system carry, on a substitute basis, any nonnetwork television program broadcast by a distant station?								
	Note: If your answer is "No log in block 2. 2. LOG OF SUBSTITUT		<u> </u>	age blank. If your answer	s "Yes," you r	must com	piete the pro	gram	
	period, was broadcast by a under certain FCC rules, ro Do not use general catego "NBA Basketball: 76ers vs Column 2: If the progra Column 3: Give the call Column 4: Give the brothe case of Mexican or Ca Column 5: Give the mo first. Example: for May 7 g Column 6: State the tim to the nearest five minutes stated as "6:00–6:30 p.m."	of every not a distant state egulations, in the state of	onnetwork teletion and that yor authorizatio ovies" or "bask adcast live, ent station broaddon's location (ons, if any, the when your sy e substitute program car e listed program ions in effect of	evision program ("substitut your cable system substitut your cable system substitu- ins. See page (v) of the ge- ketball." List specific progra- ter "Yes." Otherwise enter casting the substitute prog- the community to which the e community with which the yotem carried the substituter orgram was carried by you rried by a system from 6:0 m was substituted for prog- during the accounting peri-	ted for the proper and titles, for a "No."  "No."  gram.  ne station is lide program. Use program. Use program. Use program. Use program. Use program. Use gramming that god; enter the legar and the station of the system of the	ogrammin ions for fuexample, " censed by entified). se numera m. List the c:28:30 p.r.	g of another inther informatic love Lucy"  the FCC or, als, with the ite times accurate should be term was required the listed principle.	station ation. or in month rately	
	effect on October 19, 1976	i.			WHE	N SUBST	TITUTE	7. 054004 500	
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN		5. MONTH AND DAY	AGE OCO 6. FROM	TIMES  TO	7. REASON FOR DELETION	
		1 35 31 115	07.22 0.0.1	GIVIII GIVE EGGIVII GIV	7.11.12 27.11				
		<del> </del>			-			"	
		<del> </del>						"	
							<u> </u>	"	
				 				"	
				 			<u>. —</u>		
							_		
							_		
							_		
								<del> </del>	
		<del> </del>					_=		

	LEGAL NAME OF OWNER OF CABLE SYSTEM:			SYSTEM I					
Name	Cogeco US (Delmar), LLC		`	265					
K Gross Receipts	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 (as identified in space E) during the accounting period. For a further explanation of how to compute this amount, see 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.		\$ 443,803.00						
	IMPORTANT: You must complete a statement in space P concerning gross receipts.		(Amount of g	ross 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 less than 0.  Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than 0.  See page (vi) of the general instructions located in the paper SA1-2 form for more information.		53,800						
	BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LES	SS							
	Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you accounting period is \$52.00	must pay for th	nis six-mon						
	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 and 2								
	BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more	than \$137,10	0)						
	1. Base amount under statutory formula	63,800.00							
	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)	<u> </u>							
	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	s than \$527,6	(00)						
	Enter the amount of gross receipts from space K	43,803.00							
	2. Base amount under statutory formula	63,800.00							
	3. Subtract line 2 from line 1	30,003.00							
	4. Multiply line 3 by .01		1,800.03						
	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	····	\$	3,119.03					
	FILING FEE AND TOTAL REMITTANCE DUE								
Filing Foo and									
Filing Fee and otal Remittance	1. Royalty Fee Payable for Accounting Period (from Block 1, 2, or 3, above)		3,119.03						
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		\$	3,139.03					
	Important: Your remittance must be in the form of an electronic payment payable See page i of the general instructions in the paper SA1-2 form for m	-		ghts!					

Accounting Period:	2023/2					FORM SA1-2E. PAGE 7.
Name	LEGAL NAME OF O	WNER OF CABLE SYSTEM: Imar), LLC				SYSTEM ID# 26504
<b>M</b> Channels	to its subscribers,     Enter the total system carried t     Enter the total on which the car.	number of channels on which relevision broadcast stations. number of activated channels ble system carried television b		els during the acc	ounting period.	283
N Individual to Be Contacted	INDIVIDUAL TO		ER INFORMATION IS NEEDE		ividual to whom	
for Further Information	Name	Patrick Bratton			Telephone	617-786-8800
	Address	2 Batterymarch Park, (Number, street, rural route, apartm Quincy, MA 02169				
	Email	(City, town, state, zip)  pbratton@breez	eline com		Fax (ontional)	
	Email	psia			Tax (optional)	
0	CERTIFICATION (	This statement of account mu	st be certified and signed in a	ccordance with Co	opyright Office regulations)	
Certification	• I, the undersigne	d, hereby certify that (Check or	ne, but only one, of the boxes.)			
	(Owner	other than corporation or pa	artnership) I am the owner of the	he cable system as	s identified in line 1 of space	e B; or
		-	tion or partnership) I am the d wner is not a corporation or part		ent of the owner of the cable	system as identified
		er or partner) I am an officer (if ne 1 of space B.	a corporation) or a partner (if a	a partnership) of th	e legal entity identified as o	wner of the cable system
		e, and correct to the best of my	nereby declare under penalty of knowledge, information, and be			in
			X /s/ Patrick Bratt	ton		-
			Enter an electronic signature on Enter signature using an "/s/ sig			
		Typed or printed				
		Title: (Title of off	Chief Financial Office icial position held in corporation or pa			
		Date:			March 1, 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.

Accounting Period: 2023/2 FORM SA1-2E. PAGE 8 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 26504 Cogeco US (Delmar), LLC 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 fol-"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 sub-**Special Statement** scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." **Concerning Gross Receipts Exclusion** 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 Name 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 underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. **Interest Assessment** davs Line 3 Multiply line 2 by the number of days late and enter the sum here . . . . . . . . . x 0.00274 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 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 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.