FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AFFIDAVIT

OFFICER OR ATTORNEY/ AGENT:					
COMPANY	Dovetel Communications LLC				
NAME	Kyle Williamson				
TITLE	CEO				
ADDRESS 1	1090A Pacific Avenue				
ADDRESS 2					
CITY	Bremen	STATE	Georgia	ZIP CODE	30110

THE INDIVIDUAL NAMED ABOVE (HEREINAFTER, "AFFIANT") PERSONALLY APPEARED BEFORE THE UNDERSIGNED, AN OFFICER DULY AUTHORIZED TO ADMINISTER OATHS. THE AFFIANT, AFTER FIRST BEING DULY SWORN, DEPOSES AND CERTIFIES THAT HE OR SHE HAS READ COMMISSION RULE 515-12-1-.37 FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AND WILL COMPLY WITH THE REQUIREMENTS CONTAINED THEREIN.

THIS AFFIDAVIT SHALL CONSTITUTE THE PLAN FOR PROTECTION OF THE CONFIDENTIALITY OF FAMILY VIOLENCE SHELTERS REQUIRED BY COMMISSION RULE 515-12-1-.37 FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AND O.C.G.A. § 46-5-7.

K Williamson

SIGNATURE OF AFFIANT

12/15/2022

DATE

SUBSCRIBED AND SWORN TO ME THIS

15th DAY OF December, 20 22.

Michelle Margarette McLeroy

NOTARY PUBLIC

(SEAL)

MICHELLE MARGARETTE MCLEROY NOTARY PUBLIC HARALSON COUNTY, GA MY COMMISSION EXPIRES AUGUST 13 2026