FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AFFIDAVIT

OFFICER OR ATTORNEY/ AGENT:					
COMPANY	Pembroke Telephone Company, Inc.				
NAME	Mary Anna B. Hite				
TITLE	Secretary-Treasurer, CFO				
ADDRESS 1	PO Box 10				
ADDRESS 2					
CITY	Pembroke	STATE	GA	ZIP CODE	31321

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.

Mary Anna B Hite

SIGNATURE OF AFFIANT

January 9, 2023

DATE

SUBSCRIBED AND SWORN TO ME THIS

9th DAY OF January, 2023.

Gwendolyn Bacon-Jones

NOTARY PUBLIC

GWENDOLYN BACON-JONES
NOTARY PUBLIC
BRYAN COUNTY, GEORGIA
My Commission Expires
November 4, 2023