**FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AFFIDAVIT**

| OFFICER OR ATTORNEY/ AGENT: | | | | | |
|---|---|---|---|---|---|
| COMPANY | MEDIACOM WIRELESS OF GEORGIA, LLC | | | | |
| NAME | ANNA SOKOLIN-MAIMON | | | | |
| TITLE | Vice President, Regulatory Affairs | | | | |
| ADDRESS 1 | 1 Mediacom Way | | | | |
| ADDRESS 2 | | | | | |
| CITY | Mediacom Park | STATE | NY | ZIP CODE | 10918 |

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.

SIGNATURE OF AFFIANT

2/22/2023
DATE

SUBSCRIBED AND SWORN TO ME THIS
22 DAY OF February, 2023.

Linda Rossi
NOTARY PUBLIC

(SEAL)
LINDA ROSSI
Notary Public, State of New York
No. 01RO6180139
Qualified in Orange County
Commission Expires January 7, 2027

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