FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AFFIDAVIT

OFFICER OR ATTORNEY/ AGENT:					
COMPANY	Hudson Fiber Network, Inc.				
NAME	Telisa Webb Schelin				
TITLE	Senior Vice President, General Counsel & Secretary				
ADDRESS 1	3030 Warrenville Rd.				
ADDRESS 2	Suite 340				
CITY	Lisle	STATE	IL	ZIP CODE	60532

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

3/1/23
DATE

SUBSCRIBED AND SWORN TO ME THIS
1st DAY OF March, 20 23.

NOTARY PUBLIC

(SEAL)

TIMOTHY SEAN BUCK
Notary Public, State of Texas
Comm. Expires 12-09-2026
Notary ID 134098073