FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AFFIDAVIT

OFFICER OR ATTORNEY/ AGENT:					
COMPANY	TNC COMMUNICATIONS OF GEORIGA, LLC				
NAME	ADDAM HOLDORF				
TITLE	AUTHORIZED REPRESENTATIVE				
ADDRESS 1	624 HOLLY SPRINGS RD				
ADDRESS 2					
CITY	HOLLY SPRINGS	STATE	NC	ZIP CODE	27540

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

26 SEPT 2023
DATE

SUBSCRIBED AND SWORN TO ME THIS
26 DAY OF September 2023.

NOTARY PUBLIC

(SEAL)

LINDA CAMERON
MY COMMISSION # GG 970933
EXPIRES: May 21, 2024
Bonded Thru Notary Public Underwriters