FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AFFIDAVIT

OFFICER OR ATTORNEY/ AGENT:					
COMPANY	Bulloch County Rural Telephone Cooperative, Inc.				
NAME	Melisa Hendrix				
TITLE	Chief Operating Officer				
ADDRESS 1	841 Buckhead Dr				
ADDRESS 2					
CITY	Statesboro	STATE	Ga	ZIP CODE	30458

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.

Melisa C. Hendrix

SIGNATURE OF AFFIANT

January 16, 2025

DATE

SUBSCRIBED AND SWORN TO ME THIS
16th DAY OF January, 20 25.

LaShelby Brown Scott

NOTARY PUBLIC

(SEAL)

LACHELBY BROWN SCOTT
NOTARY PUBLIC
Comm. Exp. 05/15/28
BULLOCH COUNTY, GA