FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AFFIDAVIT

OFFICER OR ATTORNEY/ AGENT:					
COMPANY	RCLEC, Inc.				
NAME	Rachel W. Petty				
TITLE	Secretary				
ADDRESS 1	20 Davis Drive				
ADDRESS 2					
CITY	Belmont	STATE	CA	ZIP CODE	94002

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.

Rachel W. Petty
SIGNATURE OF AFFIANT

1-23-2025
DATE

SUBSCRIBED AND SWORN TO ME THIS

23 DAY OF January, 2025.

Jason Franklin
NOTARY PUBLIC

(SEAL)

JASON FRANKLIN
OFFICIAL SEAL
NOTARY PUBLIC - STATE OF ILLINOIS
My Commission 898128 Expires 7-16-2027