FAMILY VIOLENCE SHELTER CONFIDENTIALITY PROTECTION AFFIDAVIT

OFFICER OR ATTORNEY/ AGENT:					
COMPANY	Hart Telephone Company				
NAME	Melissa F. Green				
TITLE	CFO				
ADDRESS 1	PO Box 388				
ADDRESS 2	196 N Forest Ave.				
CITY	Hartwell	STATE	GA	ZIP CODE	30643

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.

Melissa F. Green
SIGNATURE OF AFFIANT

1/7/25
DATE

SUBSCRIBED AND SWORN TO ME THIS

7 DAY OF January, 2025.

Julie Wilson
NOTARY PUBLIC

(SEAL)

JULIE WILSON NOTARY PUBLIC MY COMMISSION EXPIRES 07/24/26 HART COUNTY, GEORGIA