**CUSTOMER NOTICE AFFIDAVIT**

State of:

County of:

**AFFIDAVIT**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am an authorized agent of the applicant corporation,

 (Name)

Mountain Communications, LLC and am authorized to make this statement on its behalf. I attest

 (Company Name)

That the customer notice(s) accompanying this affidavit were sent to affected customers through

\_\_\_Bill Insert\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 (type of notice) (date/timeframe)

In accordance with Rule 4904:1-5-07, Ohio Administrative Code. I declare under penalty of perjury that

the foregoing is true and correct.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Signature)

Executed on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (date) (location