

EXHIBIT G - NOFA #008
Form 22 – Request for Confidentiality
Alterations to this document are prohibited

All Applicants must complete either Section I or Section II of this form.

Complete Section I if you are NOT requesting confidential treatment.

- I. Confidential Treatment is not Requested.** By signing and submitting this Form 22, Applicant certifies that a request for confidential treatment of materials or information contained in its Application is not requested.

Chad Fall
Authorized Representative's Signature

8/24/23
Date

Chad Fall
Name (Printed)

Cedar Communications LLC.
Applicant Organization

General Manager
Title

8
NOFA Number
