
WARM SPRINGS TELECOMMUNICATIONS COMPANY

March 15, 2011

Filing Center
Oregon Public Utility Commission
PO Box 2148
Salem, OR 97308

RE: UM 1481 - In the matter of the the Oregon Public Utility
Commission Staff Investigation of the Oregon Universal Service Fund

Reply Comments of the Warm Springs Telecommunications Company

Dear Commission:

Enclosed for filing please find an original and one copy of the Signatory Pages to Order No 11-704 in connection with the above referenced. Also, enclosed is a Certificate of Service.

Thank you for your concern in this matter.

Sincerely,

Marsha Spellman

Marsha Spellman
Regulatory Director, WSTC

PO Box 910
Warm Springs
Oregon
97761

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Website www.warmspringstelecom.com

SIGNATORY PAGE
UM 1481

I. Consent to be Bound:

This general protective order governs the use of Confidential Information in these proceedings.

Warm Springs Telecom, Inc (Party) agrees to be bound by the terms of the general protective order and certifies that it has an interest in these proceedings that is not adequately represented by other parties to the proceedings.

Signature: Marsha Spellman
 Printed Name: Marsha Spellman
 Date: March 15, 2011

II. Persons Qualified under Paragraphs 3(a) through 3(d):

WSTC (Party) identifies the following person(s) automatically qualified under paragraphs 3(a) through (d).

PRINTED NAME	DATE
<u>Marsha Spellman</u>	<u>3/15/11</u>
<u>Adam Haas</u>	<u>3/15/11</u>

SIGNATORY PAGE
UM 1481

III. Persons Qualified under Paragraph 3(e):

I have read the general protective order, agree to be bound by the terms of the order, and will provide the information identified in paragraph 10.

By: Signature: Marsha Spellman Date: 3/15/11

Printed Name: Marsha Spellman

Address: 10425 SW Hawthorne Lane

Employer: Warm Springs Telecom Corp, Inc.

Job Title: Regulatory Director

Paragraph 10(e) information also provided.

By: Signature: _____ Date: _____

Printed Name: _____

Address: _____

Employer: _____

Job Title: _____

Paragraph 10(e) information also provided.

By: Signature: _____ Date: _____

Printed Name: _____

Address: _____

Employer: _____

Job Title: _____

Paragraph 10(e) information also provided.

By: Signature: _____ Date: _____

Printed Name: _____

Address: _____

Employer: _____

Job Title: _____

Paragraph 10(e) information also provided.

CERTIFICATE OF SERVICE
UM 1481

I certify that I sent the attached Signatory Page to Order No. 11-0 74 by electronic mail and U.S. mail to the following:

FILING CENTER
PUBLIC UTILITY COMMISSION OF OREGON
PO BOX 2148
SALEM, OR 97308-2148
puc.filingcenter@state.or.us

I hereby certify that I served the attached Signatory Page to Order No. 11-0 74 upon all parties of record in this proceeding by electronic mail, pursuant to OAR 860-013-00 70, to the following parties or attorneys of parties:

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