

SIGNATORY PAGE
DOCKETNO. UE 294

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: [Signature] Date: 5/11/15

Printed Name: Lori Hymowitz

Address: 610 SW Broadway Ste 400, Portland OR 97205

Employer: CUB

Job Title: Reg. Admin. Ass't

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.