

APPENDIX B  
DOCKET UM 1654

Signatory Page for Confidential Information

I. Consent to be Bound

This Modified Protective Order governs the use of "Confidential Information" and "Highly Confidential Information" in this proceeding.

Citizens Utility Board (Party) agrees to be bound by its terms of this Modified Protective Order. of Oregon

By: Signature: [Signature]  
 Printed Name: Sommer Tempert  
 Date: 3/12/14

II. Persons Qualified pursuant to Paragraphs 4(a), (b), (d), and (e): Confidential Information

CUB (Party) identifies the following person(s) automatically qualified under paragraph 4(a), (b), (d), and (e).

PRINTED NAME	DATE
G. Catriona McCracken	3/12/14
Sommer Tempert	3/12/14
SARA Athoff	

III. Persons Qualified pursuant to Paragraph (4)(c) and (f) and Paragraph 17: Confidential Information

I have read the Modified Protective Order, agree to be bound by the terms of the order, and will provide the information identified in paragraph 17(e).

By: Signature: [Signature] Date: 3-14-14  
Printed Name: Bob Jones  
Address: 1010 SW Broadway, Ste. 400, Portland, OR 97205  
Employer: CUB  
Job Title: Executive Director  
 Paragraph 17(e) information also provided.

By: Signature: [Signature] Date: 3/12/2014  
Printed Name: Jaimie McBoverm  
Address: 1010 SW Broadway, Ste. 400, Portland, OR 97205  
Employer: CUB  
Job Title: SR. Utility Analyst  
 Paragraph 17(e) information also provided.

By: Signature: [Signature] Date: 3/12/2014  
Printed Name: Nadine Hannan  
Address: 1010 SW Broadway, Ste. 400, Portland, OR 97205  
Employer: CUB  
Job Title: Utility Analyst  
 Paragraph 17(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
 Paragraph 17(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
 Paragraph 17(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
 Paragraph 17(e) information also provided.

APPENDIX C  
DOCKET UM 1654

Signatory Page for Highly Confidential Information

I. Consent to be Bound

This Modified Protective Order governs the use of "Confidential Information" and "Highly Confidential Information" in this proceeding.

CUB (Party) agrees to be bound by its terms of this Modified Protective Order.

Signature: Sommer A

Printed: SOMMER TEMPLE

Date: 3/12/14

II. Persons Qualified pursuant to Paragraph 5 and Paragraph 17: Highly Confidential Information:

I have read the Modified Protective Order, agree to be bound by the terms of the order, and will provide the information identified in paragraph 17.

I certify that:

- a. I will make copies only as needed for purposes of review and submission to the Commission.
- b. I agree to keep the information in a secure manner as required by Paragraph 12.
- c. I understand that ORS 756.990(2) allows the Commission to impose monetary sanctions if a party subject to the jurisdiction of the Commission violates an order of the Commission.
- d. The party I am associated with has a legitimate and non-competitive need for the Highly Confidential Information and not simply a general interest in the information.

By: Signature: Sommer A Date: 3/12/14  
 Printed Name: SOMMER TEMPLE  
 Address: 1616 SW Broadway, Ste. 400, Portland, OR 97205  
 Employer: CUB  
 Job Title: Staff Attorney

Paragraph 17(e) information also provided.

By: Signature: [Signature] Date: 3-12-14  
Printed Name: G. Cathiona McCracken  
Address: 1010 SW Broadway, Ste. 400, Portland, OR 97205  
Employer: CUB  
Job Title: General Counsel / Reg. Programs Dir.  
 Paragraph 17(e) information also provided.

By: Signature: [Signature] Date: 3-14-14  
Printed Name: Bob Jones  
Address: 1010 SW Broadway, Ste. 400, Portland, OR 97205  
Employer: CUB  
Job Title: Executive Director  
 Paragraph 17(e) information also provided.

By: Signature: [Signature] Date: 3/12/2014  
Printed Name: Taime McBovern  
Address: 1010 SW Broadway, Ste. 400, Portland, OR 97205  
Employer: CUB  
Job Title: SR. Utility Analyst  
 Paragraph 17(e) information also provided.

By: Signature: [Signature] Date: 3/12/2014  
Printed Name: Nadine Hannan  
Address: 1010 SW Broadway, Ste. 400, Portland, OR 97205  
Employer: CUB  
Job Title: Utility Analyst  
 Paragraph 17(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
 Paragraph 17(e) information also provided.

## UM 1654 – CERTIFICATE OF SERVICE

I hereby certify that, on this 14<sup>th</sup> day of March, 2014, I served the foregoing **SIGNATORY PAGES OF CITIZENS' UTILITY BOARD OF OREGON** in docket UM 1654 upon each party listed in the UM 1654 PUC Service List by email and, where paper service is not waived, by U.S. mail, postage prepaid, and upon the Commission by email and by sending one original and one copy by U.S. mail, postage prepaid, to the Commission's Salem offices.

(W denotes waiver of paper service)

(C denotes service of Confidential material authorized)

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Respectfully submitted,

A handwritten signature in cursive script that reads "Sommer Templet".

Sommer Templet, OSB #105260  
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