

**SIGNATORY PAGE**  
**DOCKET NO. UM 1662**

**I. Consent to be Bound:**

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

Citizens Utility Board of Oregon (CUB) (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: \_\_\_\_\_

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Printed Name: \_\_\_\_\_

Sommer Tempert

Date: \_\_\_\_\_

5/4/15

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

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

PRINTED NAME	DATE
<u>Gabriel S. Walsh</u>	<u>5/4/15</u>

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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 Nymowitz  
 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.