

**BEFORE THE PUBLIC UTILITY COMMISSION  
OF OREGON**

UT 125

**In the Matter of:**

QWEST CORPORATION, fka

US WEST COMMUNICATIONS, INC.,

Application for Increase in Revenues.

On Remand from the  
Appellate Court No. CA No. A166810  
Agency Case No. DR 26/UC 600

**PETITION**

For Pro Hac Admission of  
James R. Pikel As Associated Counsel

**Petitioner NPCC  
Motion for the Admission of James R. Pikel,  
Pro Hac Vice**

Petitioner NPCC, by its counsel Franklin G Patrick, Moves the PUC pursuant to ORS 9.241 and UTCR 3.170, and PUC OAR 860-001-0320, for an Order admitting James R. Pikel, Attorney at Law from the State of Texas the time to appear and make argument and filings in this matter.

NPCC is and has been represented by Franklin G. Patrick, OSB 760228 who will continue in this case as lead counsel and is sponsor of this Applicant pursuant to the attached **Ex "A"**; the Certificate of Compliance from the Oregon State Bar, and the Certificates attached thereto of: Mr. Pikel's Certificate of Good Standing with the Texas State Bar, and the Insurer's Declaration of Professional liability insurance.

Original E-filed: November 21, 2023

*/s/ Frank G. Patrick*

Frank G. Patrick, Attorney for Appellant  
OSB 760228

**SERVICE**

Service was by Email E-Filing Pursuant to PUC Rule:

Public Utility Commission Of Oregon  
550 Capitol Street NE, Suite 215  
PO Box 2148  
Salem, OR 97308-2148  
[PUC.FilingCenter@puc.oregon.gov](mailto:PUC.FilingCenter@puc.oregon.gov)

Attorney General of Oregon  
Natascha B. Smith, OSB 174661  
Oregon Dept. Justice, Appellate Div.  
1162 Court Street NE  
Salem, Oregon 97301  
Tel: 503-378-4400  
E-mail: [natascha.b.smith@gmail.com](mailto:natascha.b.smith@gmail.com)  
**Attorney for the PUC**

PERKINS COIE LLP  
Lawrence H. Reichman, OSB No. 860836  
1120 N.W. Couch Street, Tenth Floor  
Portland, OR 97209-4128  
Tel: 503 727-2019  
E-mail: [LReichman@perkinscoie.com](mailto:LReichman@perkinscoie.com)  
**Attorney for QWEST**

November 21, 2023

*/s/ Frank G. Patrick*  
\_\_\_\_\_  
Frank G. Patrick, Attorney for Appellant  
OSB 760228

In re: James A. Piki  
Name of Out-of-State Attorney )

**Certificate of Compliance  
For Pro Hac Vice Admission**

I, James A. Piki (print name), am an attorney in the State of Texas  
and I intend to seek *pro hac vice* admission in accordance with ORS 9.241 and UTCR 3.170 in the following Oregon court action or proceeding:

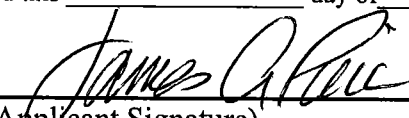
Case Name: NPCC v. Qwest Corporation

Court: Oregon Public Utilities Comm. Case No.: UT-125

I certify that (check all that apply):

- I am an attorney in good standing in the State of Texas, as evidenced by the attached good standing certificate issued by the licensing authority in that state.
  - I am not subject to any pending disciplinary proceedings in any jurisdiction; or
  - I am subject to pending disciplinary proceedings in another jurisdiction, the nature and status of which are described in an attachment to this certificate.
- I intend to associate in the above-referenced action or proceeding with Frank Patrick, OSB No. 760228, an active member in good standing of the Oregon State Bar, who will participate meaningfully in the matter.
- I will comply with applicable statutes, laws, and procedural rules of the State of Oregon; be familiar with and comply with disciplinary rules of the Oregon State Bar; and submit to the jurisdiction of the Oregon courts and Oregon State Bar with respect to acts and omissions occurring during my *pro hac vice* admission.
- My private law practice activities in Oregon are covered by professional liability insurance substantially equivalent to the Oregon State Bar Professional Liability Fund plan, as evidenced by the attached certificate of insurance coverage.
- I agree, as a continuing obligation of *pro hac vice* admission, to notify the trial court promptly of any changes in my insurance coverage, or my admission or disciplinary status in any other jurisdiction.
- I will provide to the Oregon State Bar a copy of the order admitting me *pro hac vice* in the above-referenced matter when such an order is granted. In the event *pro hac vice* admission is revoked for any reason, I will promptly notify the Oregon State Bar.
- I submit \$500 to the Oregon State Bar as payment of the *pro hac vice* fee established by ORS 9.241 and the rules of the Oregon Supreme Court. I acknowledge that this fee is for a period of twelve months from the date of the Acknowledgment of Receipt issued below, and that an additional fee of \$500 will be required in order for me to continue my *pro hac vice* admission in the matter for every twelve-month period thereafter.

Dated this 16 day of November, 2023.

**X**   
(Applicant Signature)

Texas Bar No.: 16008850  
(Home Jurisdiction)

Mailing Address: 2600 Network, Suite 400  
Frisco, Texas 75034

Phone: 214-472-2100  
FAX: 214-472-2150  
Email: jim.piki@solidcounsel.com

**Acknowledgment of Receipt**

As Director of Regulatory Services of the Oregon State Bar, I acknowledge receipt from the above-named out-of-state attorney of the Certificate of Compliance for Pro Hac Vice Admission and attachments, and the \$500 fee for pro hac vice appearance in the above-referenced Oregon action or proceeding. The fee is for a period of twelve months from the date of this acknowledgment.

Dated this 20th day of November, 2023.

SEE MATERIALS ATTACHED:

  
Troy Wood, Regulatory Counsel

Oregon State Bar Regulatory Services, PO Box 231935, Tigard, OR 97281-1935

Note: the professional liability coverage deductible substantially exceeds that of the PLF.

# The Supreme Court of Texas

AUSTIN

CLERK'S OFFICE

I, **BLAKE HAWTHORNE**, Clerk of the Supreme Court of Texas, certify that the records of this office show that

**James A. Piki**

was duly admitted and licensed as an attorney and counselor at law by the Supreme Court of Texas on the 7th day of November, 1986.

I further certify that the records of this office show that, as of this date

**James A. Piki**

is presently enrolled with the State Bar of Texas as an active member in good standing.

**IN TESTIMONY WHEREOF** witness my signature



and the seal of the Supreme Court of Texas at the City of Austin, this, the 12th day of October, 2023.

BLAKE HAWTHORNE, Clerk

Blake A. Hawthorne  
Clerk, Supreme Court of Texas

No. 1131C.1



**Regulatory Office**

Dept: Regulatory  
505 Eagleview Blvd., Suite 100  
Exton, PA 19341-1120  
Telephone: 800-688-1840

**Insurance Company Providing Coverage: Indian Harbor Insurance Company**

**LAWYERS PROFESSIONAL LIABILITY INSURANCE POLICY DECLARATIONS**

**POLICY NO.:** LPN9046171

**RENEWAL OF:** New Policy

**THIS IS A 'CLAIMS MADE' POLICY. SUBJECT TO ITS TERMS AND PROVISIONS, THIS POLICY ONLY AFFORDS COVERAGE FOR CLAIMS FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD OR DISCOVERY PERIOD, IF APPLICABLE. IN ADDITION, CLAIM EXPENSES ARE INCLUDED IN AND WILL REDUCE THE LIMITS OF LIABILITY.**

**PLEASE READ THIS ENTIRE POLICY CAREFULLY. CONSULT YOUR BROKER OR OTHER REPRESENTATIVE IF YOU DO NOT UNDERSTAND ANY TERMS OR PROVISIONS OF THIS POLICY.**

THIS INSURANCE CONTRACT IS WITH AN INSURER NOT LICENSED TO TRANSACT INSURANCE IN THIS STATE AND IS ISSUED AND DELIVERED AS SURPLUS LINE COVERAGE UNDER THE TEXAS INSURANCE STATUTES. THE TEXAS DEPARTMENT OF INSURANCE DOES NOT AUDIT THE FINANCES OR REVIEW THE SOLVENCY OF THE SURPLUS LINES INSURER PROVIDING THIS COVERAGE, AND THE INSURER IS NOT A MEMBER OF THE PROPERTY AND CASUALTY INSURANCE GUARANTY ASSOCIATION CREATED UNDER CHAPTER 462, INSURANCE CODE. CHAPTER 225, INSURANCE CODE, REQUIRES PAYMENT OF A 4.85 PERCENT TAX ON GROSS PREMIUM.

**Item 1. Named Insured:** SCHEEF & STONE, LLP

Mailing Address: 500 NORTH AKARD STREET  
SUITE 2700  
DALLAS, TX 75201

**Item 2. Policy Period:**

From: April 5, 2023 To: April 5, 2024  
12:01 A.M. Standard Time at the address of the **Named Insured** as stated Item 1.

**Item 3. Limits of Liability:**

A. Limit of Liability - each <b>Claim</b>	\$	<u>5,000,000</u>
B. Limit of Liability - Aggregate	\$	<u>5,000,000</u>
C. Limit of Liability - Extension of Coverage Sublimit	\$	<u>10,000</u>

**Item 4. Retention:** \$ 100,000 each **Claim**  
\$ N/A Aggregate

**Item 5. Predecessor Firm(s):**

None

**Item 6. Retroactive Date:** None

**Item 7. Premium:** \$ XXXXXXXX

**Item 8. Endorsements Applicable to Coverage at Inception of Policy:  
(See Attached Schedule of Forms and Endorsements)**

**Item 9. Producer Name:** RSC Insurance Brokerage, Inc.  
Mailing Address: 104 Woodmont Blvd. Suite 400  
Nashville, TN 37205

**THESE DECLARATIONS, TOGETHER WITH THE COMPLETED AND SIGNED APPLICATION FOR THIS POLICY, ALL MATERIALS SUBMITTED THEREWITH OR MADE A PART THEREOF AND THE POLICY FORM ATTACHED HERETO, CONSTITUTE THE POLICY.**

This Policy shall not be valid unless signed by a duly authorized representative of the **Insurer**.



\_\_\_\_\_  
Authorized Representative