

## WALKER Cheryl

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**From:** HUNTER Karla  
**Sent:** Thursday, January 18, 2018 3:21 PM  
**To:** WALKER Cheryl  
**Subject:** 2017-38 FLC NC 379- Fine Signs Bend Metro Bend (EA)  
**Attachments:** Fine Signs Training 1-18-2018.pdf

Cheryl

Here is training for NC 379.

*Karla Hunter*

Safety Policy Analyst  
Utility Safety, Reliability and Security Division  
201 High St SE Suite 100, Salem OR 97301  
☎: 503-373-0044  
✉: 503-385-3986





**Oregon Public Utility Commission**  
**Training Verification**

Docket NC \_\_\_\_\_

*Fine Signs*

**Instructions:**

- Defendant:
  - Schedule training(s) outlined in Stipulation
  - Complete the Training Verification form on the day of the training
  - All attendees must print and sign their name on the Training Verification form
  - Have instructor date and sign the Training Verification form upon completion of training
  - Defendant **must** mail completed Training Verification form to the address below *(retain a copy for your records)*
  
- Instructor:
  - Date and sign the Training Verification form upon completion of training

**Type of Training:** *(To be filled out by the instructor)*

OUNC – Oregon Excavation Laws      Operator Safety Presentation      Other:

Instructor Print Name: William Waiber

Instructor Signature: W. Waiber     Date: 1-25-18

Name (Printed)	Name (Signed)
Randy W Arends	<i>Randy W Arends</i>
David "Lance" Fine	<i>[Signature]</i>

Mail Completed form to:

**Public Utility Commission of Oregon**  
**Administrative Hearings Division**  
 201 High St. SE, Ste. 100  
 PO Box 1088  
 Salem OR 97308-1088



**Oregon Public Utility Commission  
Training Verification**

Docket NC 379

**Instructions:**

- Defendant:
  - Schedule training(s) outlined in Stipulation
  - Complete the Training Verification form on the day of the training
  - All attendees must print and sign their name on the Training Verification form
  - Have instructor date and sign the Training Verification form upon completion of training
  - Defendant must mail completed Training Verification form to the address below (*retain a copy for your records*)
- Instructor: Shannon Potter
  - Date and sign the Training Verification form upon completion of training

**Type of Training:** (*To be filled out by the instructor*)

OUNC – Oregon Excavation Laws     Operator Safety Presentation     Other:

Instructor Print Name: Shannon Potter

Instructor Signature:     Date: 1-18-18

Name (Printed)	Name (Signed)
<u>David Lance</u>	<u>See below</u>

Mail Completed form to:

Public Utility Commission of Oregon  
Administrative Hearings Division  
201 High St. SE, Ste. 100  
PO Box 1088  
Salem OR 97308-1088

David Lance  
Fine  
Fine Signs LLC