

APPENDIX A

Signatory Page for Parties and Persons Qualified to Access Highly Confidential Information Under Paragraph 9

I. Consent to be Bound

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

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

Signature: 

Printed: Mike Goetz


Date: 1/25/2021


II. Persons Qualified Pursuant to Paragraph 9.


I have read the Modified Protective Order and agree to be bound by its terms.


I certify that:


- a. I agree to keep the information in a secure manner as required by Paragraphs 7 and 13, and to destroy it at the conclusion of this proceeding as required by Paragraph 16.
- b. 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.
- c. The party with which I am associated has a legitimate and non-competitive need for the Highly Confidential Information and not simply a general interest in the information.

By: Signature:  Date: 1/25/2021
 Printed Name: Mike Goetz
 Address: 610 SW Broadway, Suite 400. Portland, OR 97205
 Employer: Oregon Citizens' Utility Board
 Job Title: General Counsel

By: Signature:  Date: 1/25/2021
Printed Name: Bob Jenks
Address: 610 SW Broadway, Suite 400. Portland, OR 97205
Employer: Oregon Citizens' Utility Board
Job Title: Executive Director

By: Signature:  Date: 1/25/2021
Printed Name: Will Gehrke
Address: 610 SW Broadway, Suite 400. Portland, OR 97205
Employer: Oregon Citizens' Utility Board
Job Title: Economist

By: Signature:  Date: 1/25/2021
Printed Name: Sudeshna Pal
Address: 610 SW Broadway, Suite 400. Portland, OR 97205
Employer: Oregon Citizens' Utility Board
Job Title: Economist

By: Signature:  Date: 1/25/2021
Printed Name: Thomas Jerin
Address: 610 SW Broadway, Suite 400. Portland, OR 97205
Employer: Oregon Citizens' Utility Board
Job Title: Legal Assistant / Office Manager

By: Signature: _____ Date: _____
Printed Name: _____
Address: _____
Employer: _____
Job Title: _____