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BEFORE THE PUBLIC UTILITY COMMISSION OF OREGON

ARB 671

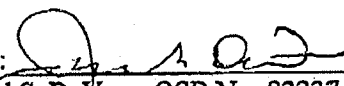
In the Matter of)	
)	
Qwest Corporation, Petition for Arbitration of)	Motion to Allow
Interconnection, Rates, Terms, Conditions and)	John C. Dodge To Appear
Related Arrangements with Universal)	<i>Pro Hac Vice</i>
Telecommunications, Inc.)	at Oral Argument

Universal Telecom, Inc. ("Universal") respectfully moves to allow John C. Dodge to appear *pro hac vice* on behalf of Universal in the above captioned matter.

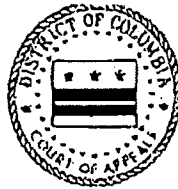
This motion is supported by a Certificate of Good Standing from the District of Columbia Bar, a Certificate of Compliance for *Pro Hac Vice* Admission, and Lawyers Professional Liability Policy Declarations, attached as Appendix A, B and C. Counsel for Qwest Corporation has represented to Universal that he does not oppose this motion.

Respectfully submitted this 18th day of August, 2005.

LUVAAS COBB
Of Attorneys for Universal Telecom, Inc.

By: 
Joel S. DeVore, OSB No. 82237

APPENDIX A



District of Columbia Court of Appeals
Committee on Admissions
500 Indiana Avenue, N.W. — Room 4200
Washington, D. C. 20001
202 / 879-2710

I, GARLAND PINKSTON, JR., Clerk of the District of Columbia
Court of Appeals, do hereby certify that

JOHN C. DODGE

_____ was on the 5TH day of FEBRUARY, 1988
duly qualified and admitted as an attorney and counselor and
entitled to practice before this Court and is, on the date
indicated below, an active member in good standing of this Bar.

In Testimony Whereof, I have
hereunto subscribed my name
and affixed the seal of this
Court at the City of
Washington, D.C., on January
11, 2005.

GARLAND PINKSTON, JR., CLERK

By: *G. Jackson*
Deputy Clerk

APPENDIX B

In re: John C. Dodge
Name of Out-of-State Attorney

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

Washington, D.C.

I, John G. Dodge (print name), am an attorney in the State of _____ and I intend to seek *pro hac vice* admission in accordance with ORS 9.241 and UCR 3.170 in the following Oregon court action or proceeding:

In the Matter of Qwest Corporation, Petition for Arbitration of Interconnection, Rates, Terms, Conditions and Related Arrangements with Universal Telecommunications, Inc.
Case Name:

Court: Oregon Public Utility Commission Case No.: ARB 671

I certify that (check all that apply):

- I am an attorney in good standing in the State of _____, 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 Joel S. DeVore, OSB No. OSB 8223, 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 \$250 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 \$250 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 18th day of August, 2005

X
(Applicant Signature)
Mailing Address: 1919 Penna. Ave. N.W. #200
Washington, D.C. 20006

D.C. Bar No.: 412743
(Home Jurisdiction)
Phone: 202-659-9750
FAX: 202-452-0067
Email: jdodge(a)crblaw.com

Acknowledgment of Receipt

I, Jeffrey D. Sapiro, Regulatory Services Counsel of the Oregon State Bar, acknowledge receipt from the above-named out-of-state attorney of the Certificate of Compliance for Pro Hac Vice Admission and attachments, and the \$250 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 _____ day of _____, 20____.

SEE MATERIALS ATTACHED:

Jeffrey D. Sapiro, Regulatory Services Counsel

Oregon State Bar Regulatory Services, PO Box 1689, Lake Oswego, OR 97035-0889

APPENDIX C

Lawyers Professional Liability Policy Declarations

Agency	Branch	Prefix	Policy Number
020970	969	LPC	133424586

Insurance is provided by Continental Casualty Company, CNA Plaza, Chicago, IL 60685.
A Stock Insurance Company.

1. NAMED INSURED AND ADDRESS:
Cole, Raywid & Braverman, L.L.P.
1919 Pennsylvania Avenue, N.W.
Suite 200
Washington, DC 20006-3458

NOTICE TO POLICYHOLDERS:
This is a Claims Made and Reported policy. It applies only to those claims that are both first made against the insured and reported in writing to the Company during the policy period. Please review the policy carefully and discuss this coverage with your insurance agent or broker.

2. POLICY PERIOD:

Inception: 05/02/2005
at 12:01 A.M. Standard Time at the address shown above.

Expiration: 05/02/2006

3. LIMITS OF LIABILITY:
Inclusive of Claims Expenses

Each Claim:	\$ 10,000,000
Aggregate:	\$ 10,000,000
Death or Disability and Non-Practicing Extended Reporting Period Limit of Liability:	Each Claim: \$ 1,000,000 Aggregate: \$ 2,000,000

4. DEDUCTIBLES:
Inclusive of Claims Expenses

Per Claim \$ 250,000

5. POLICY PREMIUM:

\$ 243,594.00

6. FORMS AND ENDORSEMENTS ATTACHED AT INCEPTION:

G-118011-A (ED. 07/01)	G-118031-A (ED. 03/02)	G-118039-A08 (ED. 06/01)	G-118049-A (ED. 09/96)
G-118016-A (ED. 09/96)	G-144872-A (ED. 01/03)	G-144959-A (ED. 11/02)	PRO9482 (05-04)

7. WHO TO CONTACT:

To report a claim:

Shauna Reeder
CNA Insurance
40 Wall Street
8th Floor
New York, NY 10005

Phone: (212) 440-3773
Fax: (212) 440-3710

Bainbridge Eager 6/7/05
Countersignature Date

Daniel S. Y...
Authorized Representative Date

Bainbridge Eager & Associates, Inc.

Bainbridge Eager & Assoc Inc
1350 Conn Ave NW #850
Washington, DC 20036
Ph 293-7666 / Fax 293-7667

G-118012-A (Ed. 3/99)

CERTIFICATE OF SERVICE

I hereby certify that I served the foregoing MOTION TO ALLOW JOHN C. DODGE TO APPEAR PRO HAC VICE AT ORAL ARGUMENT on:

Alex M. Duarte
QWEST CORPORATION
421 S.W. Oak Street, Suite 810
Portland, Oregon 97204

by the following indicated method or methods:

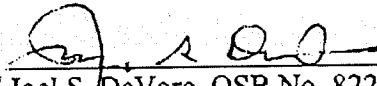
X By mailing a full, true, and correct copy thereof in a sealed, first-class postage prepaid envelope, addressed to the attorney(s) as shown above, at the last known office address of the attorney(s), and deposited with the United States Postal Service at Eugene, Oregon, on the date set forth below.

By sending a full, true, and correct copy thereof via overnight courier in a sealed, prepaid envelope, addressed to the attorney(s) as shown above, at the last known office address of the attorney(s), on the date set forth below.

By faxing a full, true, and correct copy thereof to the attorney(s) at the fax number(s) shown above, which is the last known fax number for the attorney's office, on the date set forth below. The receiving fax machine was operating at the time of service and the transmission was properly completed, according to the attached transmission report(s).

DATED this 18 day of August, 2005.

LUVAAS COBB
Of Attorneys for Universal Telecom


Joel S. DeVore, OSB No. 82237

LUVAAS / COBB
ATTORNEYS AT LAW
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Eugene, OR 97400-2747
Phone: 541-481-9292
Fax: 541-313-1206