

APPENDIX B

Signatory Page for Highly Protected Information
Docket UE 390

Persons Qualified pursuant to Paragraph 13, Highly Protected Information:

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

I certify that:

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.

The party I am associated with has a legitimate need for the Highly Protected Information for this proceeding and not simply a general interest in the information.

By: Signature: [Signature] Date: 8/25/21
Printed Name: Diane Henkels
Address: 621 SW Morrison St Ste 1025 Portland, OR 97205
Employer: Small Business Utility Advocates (Client)
Job Title: Attorney

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

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

**APPENDIX C
QUALIFICATION OF OTHER PERSONS UNDER MODIFIED PROTECTIVE ORDER
Docket UE 390**

Persons Seeking Qualification under Paragraph 14 to access Highly Protected Information:

I have read the modified protective order, agree to be bound by the terms of the order, and provide the following information to seek access to certain specific information designated as Highly Protected Information.

Signature:		Date:
Printed Name:		
Physical Address:		
Email Address:		
Employer:		
Associated Party:		
Job Title:		
If not employee of party, description of practice and clients:		