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May 8, 2014

VIA E-MAIL AND U.S. MAIL

Filing Center  
Oregon Public Utility Commission  
PO Box 2148  
Salem, OR 97308-2148

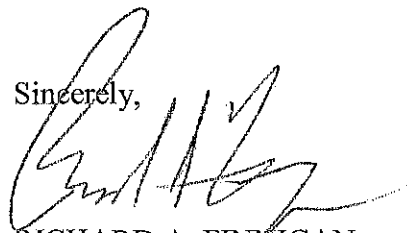
Re: Docket UM 1481

Dear Sir/Madam:

Enclosed is the original and one copy of Signatory Page for the General Protective Order (Order No. 11-074) as signed by Michael Whalen of Pioneer Telephone Cooperative and Don Lawrence of Stayton Cooperative Telephone Company. Also enclosed is the Certificate of Service.

Thank you for your attention to this matter.

Sincerely,



RICHARD A. FINNIGAN

RAF/cs  
Enclosures

cc: Service List (via e-mail)

SIGNATORY PAGE  
UM 1481

III. Persons Qualified under Paragraph 3(e):

I have read the general protective order, agree to be bound by the terms of the order, and will provide the information identified in paragraph 10.

By: Signature: Michael Whalen Date: 5-6-14  
Printed Name: Michael Whalen  
Address: PO Box 631 Philomath, OR 97370  
Employer: Pioneer Telephone Cooperative  
Job Title: Financial Manager

Paragraph 10(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_

Paragraph 10(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_

Paragraph 10(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_

Paragraph 10(e) information also provided.

ORDER NO. 1:1 " 074

SIGNATORY PAGE  
UM 1481

III. Persons Qualified under Paragraph 3(e):

I have read the general protective order, agree to be bound by the terms of the order, and will provide the information identified in paragraph 10.

By: Signature: Don Lawrence Date: 5/7/14  
Printed Name: Don Lawrence  
Address: P.O. Box 477, 502 N 2nd Ave., Stayton, OR 97183  
Employer: SCTC  
Job Title: President / CEO  
 Paragraph 10(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
 Paragraph 10(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
 Paragraph 10(e) information also provided.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
 Paragraph 10(e) information also provided.

CERTIFICATE OF SERVICE  
UM 1481

I certify that I sent the attached Signatory Pages of Michael Whalen and Don Lawrence, all on behalf of the Oregon Telecommunications Association by electronic mail and U.S. mail to the following:

FILING CENTER  
PUBLIC UTILITY COMMISSION OF OREGON  
PO BOX 2148  
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puc.filingcenter@state.or.us

I hereby certify that I served the attached Signatory Pages of Michael Whalen and Don Lawrence, all on behalf of the Oregon Telecommunications Association upon all parties of record in this proceeding by electronic mail, pursuant to OAR 860-013-0070, to the following parties or attorneys of parties:

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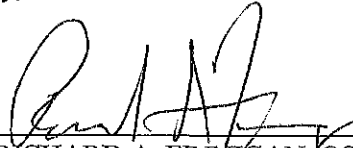
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8  
9 Dated at Olympia, WA this 8th day of May, 2014.

10  
11 By:   
12 RICHARD A. FINNIGAN, OSB No. 965357  
13 Attorney for the Oregon Telecommunications  
14 Association