APPENDIX A

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

NONDISCLOSURE CERTIFICATE

I, Joseph R. Astrab, have been presented a copy of the Protective Order issued in Docket No. <u>25-SPEE-353-TAR</u> on the <u>25th</u> day of <u>March</u>, 2025.

I have requested review of confidential information produced in the abovementioned docket on behalf of the Citizens' Utility Ratepayer Board.

I hereby certify that I have read the above-mentioned Protective Order and agree to abide by its terms and conditions.

Dated this 25th day of March, 2025.

Joseph R. Astrab/Consumer Counsel, #26414 Printed name and title

Signature

<u>Citizens' Utility Ratepayer Board</u> Party/Employer

1500 SW Arrowhead Road, Topeka, KS 66604 Address (City, State and Zip)

785-271-3200 Telephone

joseph.astrab@ks.gov Email

APPENDIX A

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

NONDISCLOSURE CERTIFICATE

I, <u>Todd E. Love</u>, have been presented a copy of the Protective Order issued in Docket No. 25-SPEE-353-TAR on the <u>25th</u> day of <u>March</u>, 2025.

I have requested review of confidential information produced in the abovementioned docket on behalf of the Citizens' Utility Ratepayer Board.

I hereby certify that I have read the above-mentioned Protective Order and agree to abide by its terms and conditions.

Dated this 25th day of March, 2025.

Todd E. Love/Attorney #13445 Printed name and title

Della

Signature

<u>Citizens' Utility Ratepayer Board</u> Party/Employer

1500 SW Arrowhead Road, Topeka, KS 66604 Address (City, State and Zip)

785-271-3200 Telephone

todd.love@ks.gov_____ Email

APPENDIX A

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

NONDISCLOSURE CERTIFICATE

I, <u>Patrick Orr</u>, have been presented a copy of the Protective Order issued in Docket No. 25-SPEE-353-TAR on the 25th day of <u>March</u>, 2025.

I have requested review of confidential information produced in the abovementioned docket on behalf of the Citizens' Utility Ratepayer Board.

I hereby certify that I have read the above-mentioned Protective Order and agree to abide by its terms and conditions.

Dated this 25th day of March, 2025.

Patrick Orr/Regulatory Analyst ______ Printed name and title

Patrukhilu

Signature

<u>Citizens' Utility Ratepayer Board</u> Party/Employer

1500 SW Arrowhead Road, Topeka, KS 66604 Address (City, State and Zip)

<u>785-271-3200</u> Telephone

patrick.orr@ks.gov_____ Email

APPENDIX A

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

NONDISCLOSURE CERTIFICATE

I, <u>Audrey Benham</u>, have been presented a copy of the Protective Order issued in Docket No. 25-SPEE-353-TAR on the <u>25th</u> day of <u>March</u>, 2025.

I have requested review of confidential information produced in the abovementioned docket on behalf of the Citizens' Utility Ratepayer Board.

I hereby certify that I have read the above-mentioned Protective Order and agree to abide by its terms and conditions.

Dated this 25th day of March, 2025.

andry Bucham

Signature /

Citizens' Utility Ratepayer Board Party/Employer

1500 SW Arrowhead Road, Topeka, KS 66604 Address (City, State and Zip)

785-271-3200 Telephone

<u>audrey.benham@ks.gov</u> Email

APPENDIX A

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

NONDISCLOSURE CERTIFICATE

I, <u>Shonda Rabb</u>, have been presented a copy of the Protective Order issued in Docket No. 25-SPEE-353-TAR on the <u>25th</u> day of <u>March</u>, 2025.

I have requested review of confidential information produced in the abovementioned docket on behalf of the Citizens' Utility Ratepayer Board.

I hereby certify that I have read the above-mentioned Protective Order and agree to abide by its terms and conditions.

Dated this 25th day of March, 2025.

Shonda Rabb/Public Service Administrator Printed name and title

Signature Signature

signature

<u>Citizens' Utility Ratepayer Board</u> Party/Employer

1500 SW Arrowhead Road, Topeka, KS 66604 Address (City, State and Zip)

785-271-3200 Telephone

<u>shonda.rabb@ks.gov</u> Email

APPENDIX A

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

NONDISCLOSURE CERTIFICATE

I, <u>Della Smith</u>, have been presented a copy of the Protective Order issued in Docket No. <u>25-SPEE-353-TAR</u> on the <u>25th</u> day of <u>March</u>, 2025.

I have requested review of confidential information produced in the abovementioned docket on behalf of the Citizens' Utility Ratepayer Board.

I hereby certify that I have read the above-mentioned Protective Order and agree to abide by its terms and conditions.

Dated this 25th day of March, 2025.

Della Smith/Administrative Specialist Printed name and title

1h

Signature

Citizens' Utility Ratepayer Board Party/Employer

1500 SW Arrowhead Road, Topeka, KS 66604 Address (City, State and Zip)

<u>785-271-3200</u> Telephone

<u>della.smith@ks.gov</u> E-mail