APPENDIX A

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

NONDISCLOSURE CERTIFICATE

I, <u>David W. Nickel</u>, have been presented a copy of the Protective Order issued in Docket No. <u>24-ATMG-531-MIS</u> on the <u>8th</u> day of <u>February</u>, 2024.

I have requested review of confidential information produced in the above-mentioned 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.

David W. Nickel/Consumer Counsel #11170 Printed name and title **Market Market Marke
Signature
Citizens' Utility Ratepayer Board
Party/Employer
1500 SW Arrowhead Road, Topeka, KS 66604
Address (City, State and Zip)
785-271-3200
Telephone
d.nickel@curb.kansas.gov
E-mail

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. <u>24-ATMG-531-MIS</u> on the <u>8th</u> day of <u>February</u>, 2024.

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 8th day of February, 2024.

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

Signature

Citizens' Utility Ratepayer Board
Party/Employer

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

785-271-3200
Telephone

t.love@curb.kansas.gov
Email

APPENDIX A

THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

NONDISCLOSURE CERTIFICATE

I, <u>Josh Frantz</u>, have been presented a copy of the Protective Order issued in Docket No. 24-ATMG-531-MIS on the 8th day of <u>February</u>, 2024.

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.

Josh Frantz/Senior Regulatory Analyst
Printed name and title
Inl. Trank Signature
Sighature
Citizens' Utility Ratepayer Board_
Party/Employer
1500 SW Arrowhead Road, Topeka, KS 66604
Address (City, State and Zip)
785-271-3200
Telephone
jp.frantz@curb.kansas.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. <u>24-ATMG-531-MIS</u> on the <u>8th</u> day of <u>February</u>, 2024.

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.

Patrick Orr/Regulatory Analyst
Printed name and title
Signature
Citizens' Utility Ratepayer Board Party/Employer
1500 SW Arrowhead Road, Topeka, KS 66604 Address (City, State and Zip)
785-271-3200 Telephone
p.orr@curb.kansas.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. <u>24-ATMG-531-MIS</u> on the <u>8th</u> day of <u>February</u>, 2024.

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 8th day of February, 2024.

Email

Audrey Benham/Regulatory Accountant
Printed name and title

Austry Bush and
Signature

Citizens' Utility Ratepayer Board
Party/Employer

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

785-271-3200
Telephone

a.benham@curb.kansas.gov

APPENDIX A

BEFORE 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. <u>24-ATMG-531-MIS</u> on the <u>8th</u> day of <u>February</u>, 2024.

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 telms and conditions.

Shonda Rabb/Public Service Administrator	
Frinted name and title	
Signature	
Citizens' Utility Ratepayer Board	
Party/Employer	
1500 SW Arrowhead Road, Topeka, KS 66604	
Address (City, State and Zip)	
785-271-3200	
Telephone	
s.rabb@curb.kansas.gov	
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. 24-ATMG-531-MIS on the 8th day of <u>February</u>, 2024.

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.

Della Smith/Administrative Specialist
Printed name and title
Wella S
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
d.smith@curb.kansas.gov_
E-mail