#### 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>17-KCPE-201-RTS</u> on the <u>22<sup>nd</sup></u> day of <u>November</u>, 2016.

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.

David W. Nickel/Consumer Counsel #11170
Printed name and title
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
785-271-3116
Facsimile
d.nickel@curb.kansas.gov_
E-mail

#### APPENDIX A

## THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

## **NONDISCLOSURE CERTIFICATE**

I, <u>Thomas J. Connors</u>, have been presented a copy of the Protective Order issued in Docket No. <u>17-KCPE-201-RTS</u> on the <u>22<sup>nd</sup></u> day of <u>November</u>, 2016.

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.

Thomas J. Connors/Attorney #27039	
Printed name and title	
Thomas O Comors	
Signature	
Citizens' Utility Ratepayer Board	
Party/Employer	
1500 SW Arrowhead Road, Topeka, KS 66604	
Address (City, State and Zip)	
785-271-3200	
Telephone	
785-271-3116	
Facsimile	

## APPENDIX A

## THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

## NONDISCLOSURE CERTIFICATE

I, <u>Shonda Smith</u>, have been presented a copy of the Protective Order issued in Docket No. <u>17-KCPE-201-RTS</u> on the <u>22<sup>nd</sup></u> day of <u>November</u>, 2016.

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.

Shonda Smith/Office Manager
Printed name and title
Mondamil
Signature
Citizens' Utility Ratepayer Board
Party/Employer
1500 SW Arrowhead Road, Topeka, KS 66604
Address (City, State and Zip)
785-271-3200
Telephone
785-271-3116
Facsimile
sd.smith@curb.kansas.gov_
E-mail

## 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>17-KCPE-201-RTS</u> on the <u>22<sup>nd</sup> day of November</u>, 2016.

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.

Della Smith/Administrative Specialist
Printed name and title
MellaSur
Signature
Citizens' Utility Ratepayer Board
Party/Employer
1500 SW Arrowhead Road, Topeka, KS 66604
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