

**STATE OF MISSOURI
PUBLIC SERVICE COMMISSION**


**NONDISCLOSURE AGREEMENT
For Case No. _____**

I, Lauren Hogrewe, have reviewed the Commission's Rule at 4 CSR 240-2.135 on the 16th day of _____, 20____.

I have requested review of the confidential information produced in Case No. _____ on behalf of _____.

I hereby certify that I have read and agree to abide by the Commission's Rule at 4 CSR 240-2.135.

Dated this 16 day of _____, 20____.



Signature & Title

Research Analyst

Employer

Party

Address

Telephone