

**STATE OF MISSOURI  
PUBLIC SERVICE COMMISSION**

**NONDISCLOSURE AGREEMENT**

For Case No.: \_\_\_\_\_  
(To Access Confidential Information)

I, \_\_\_\_\_, have reviewed the Commission's Rule at 20 CSR 4240-2.135  
on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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

I hereby certify that:

- (a) Only employees of a party that are acting as an expert for that party or that have been retained for this case as an outside expert for that party may receive confidential information;
- (b) An employee is a person in the service of his or her employer whose services are controllable by the employer;
- (c) I am an employee of \_\_\_\_\_ [state name of intervenor] acting as its expert and/or its employee who intends to file testimony in this docket, or I am an outside expert for \_\_\_\_\_ [state name of intervenor] retained to provide expert consultation or testimony in this docket;  
and
- (d) I have read and agree to abide by the Commission's Rule at 20 CSR 4240-2.135.

Dated on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature & Title

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Employer

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Party

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Address

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Telephone

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E-Mail Address