



## Filing Receipt

**Received - 2022-04-22 04:07:43 PM**

**Control Number - 52797**

**ItemNumber - 62**

**DOCKET NO. 52797**

**APPLICATION OF CONROE  
RESORT UTILITIES, LLC AND  
UNDINE DEVELOPMENT LLC FOR  
SALE, TRANSFER, OR MERGER OF  
FACILITIES AND CERTIFICATE  
RIGHTS IN MONTGOMERY  
COUNTY**

§  
§  
§  
§  
§  
§

**PUBLIC UTILITY COMMISSION  
  
OF TEXAS**

**COMMISSION STAFF'S PROTECTIVE ORDER CERTIFICATIONS**

Parties are requested to take notice of the filing of the following Staff certifications of Fred Bednarski III, Kathryn Eiland, Patricia Garcia, William Abbott, Robert Dakota Parish, Chelsey Moser, and Ian Groetsch.

Date: April 22, 2022

Respectfully submitted,

**PUBLIC UTILITY COMMISSION OF TEXAS  
LEGAL DIVISION**

Keith Rogas  
Division Director

Robert Dakota Parish  
Managing Attorney

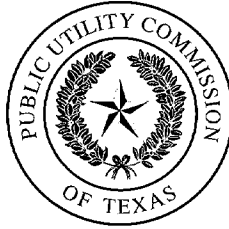
/s/ Ian Groetsch  
Ian Groetsch  
State Bar No. 24078599  
1701 N. Congress Avenue  
P.O. Box 13326  
Austin, Texas 78711-3326  
(512) 936-7465  
(512) 936-7268 (facsimile)  
[Ian.Groetsch@puc.texas.gov](mailto:Ian.Groetsch@puc.texas.gov)

**DOCKET NO. 52797**

**CERTIFICATE OF SERVICE**

I certify that, unless otherwise ordered by the presiding officer, notice of the filing of this document was provided to all parties of record via electronic mail on April 22, 2022, in accordance with the Order Suspending Rules, issued in Project No. 50664.

*/s/ Ian Groetsch*  
Ian Groetsch



## Protective Order or Confidential Filing Certification


### If confidential information is subject to a Protective Order

I certify my understanding that the Protected Materials and/or Highly Sensitive Protected Material are provided to me pursuant to the terms and restrictions of the Protective Order in this docket and that I have received a copy of it and have read the Protective Order and agree to be bound by it. I understand that the contents of the Protected Materials and/or Highly Sensitive Protected Materials, any notes, memoranda, or any other form of information regarding or derived from the Protected Materials and/or Highly Sensitive Protected Materials shall not be disclosed to anyone other than in accordance with the Protective Order and unless I am an employee of the Commission or OPC shall be used only for the purpose of the proceeding in Docket No. 52797. I acknowledge that the obligations imposed by this certification are pursuant to such Protective Order. Provided, however, if the information contained in the Protected Materials and/or Highly Sensitive Protected Materials is obtained from independent public sources, the understanding stated here shall not apply.

  
Signature  
Fred Bednarski III  
Printed Name

PUC  
Party Represented  
11/29/2021  
Date

I also certify that I am eligible to have access to Highly Sensitive Protected Materials under the terms of the Protective Order in this docket.

  
Signature  
Fred Bednarski III  
Printed Name

PUC  
Party Represented  
11/29/2021  
Date

### If confidential information is not subject to a Protective Order

I certify my understanding that the Confidential Materials provided to me may not be disclosed to anyone except as required by the provisions of the Texas Public Information Act, Texas Government Code Chapter 552, or other applicable law or court order.

\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Staff job title  
\_\_\_\_\_  
Date

**Protective Order or Confidential Filing Certification**

**If confidential information is subject to a Protective Order**

I certify my understanding that the Protected Materials and/or Highly Sensitive Protected Material (HSPM) are provided to me pursuant to the terms and restrictions of the Protective Order in this docket and that I have received a copy of it and have read the Protective Order and agree to be bound by it. I understand that the contents of the Protected Materials and/or HSPM, any notes, memoranda, or any other form of information regarding or derived from the Protected Materials and/or HSPM shall not be disclosed to anyone other than in accordance with the Protective Order and unless I am an employee of the Commission or OPUC shall be used only for the purpose of the proceeding in Docket No. 52797. I acknowledge that the obligations imposed by this certification are pursuant to such Protective Order. Provided, however, if the information contained in the Protected Materials and/or HSPM is obtained from independent public sources, the understanding stated here shall not apply.

**/s/ Kathryn Eiland**

Signature

**Kathryn Eiland**

Printed Name

**PUC Staff**

Party Represented

**4/20/2022**

Date

I certify that I am eligible to have access to Highly Sensitive Protected Material (HSPM) under the terms of the Protective Order in this docket.

**/s/ Kathryn Eiland**

Signature

**Kathryn Eiland**

Printed Name

**PUC Staff**

Party Represented

**4/20/2022**

Date

**If confidential information is not subject to a Protective Order**

I certify my understanding that the Confidential Materials provided to me may not be disclosed to anyone except as required by the provisions of the Texas Public Information Act, Texas Government Code Chapter 552, or other applicable law or court order.

**/s/ Kathryn Eiland**

Signature

**Kathryn Eiland**

Printed Name

**PUC Staff**

Party Represented

**4/20/2022**

Date

**Protective Order or Confidential Filing Certification**

**If confidential information is subject to a Protective Order**

I certify my understanding that the Protected Materials and/or Highly Sensitive Protected Material (HSPM) are provided to me pursuant to the terms and restrictions of the Protective Order in this docket and that I have received a copy of it and have read the Protective Order and agree to be bound by it. I understand that the contents of the Protected Materials and/or HSPM, any notes, memoranda, or any other form of information regarding or derived from the Protected Materials and/or HSPM shall not be disclosed to anyone other than in accordance with the Protective Order and unless I am an employee of the Commission or OPUC shall be used only for the purpose of the proceeding in Docket No. 52797. I acknowledge that the obligations imposed by this certification are pursuant to such Protective Order. Provided, however, if the information contained in the Protected Materials and/or HSPM is obtained from independent public sources, the understanding stated here shall not apply.

/s/ Patricia Garcia  
Signature

PUC Staff  
Party Represented

Patricia Garcia  
Printed Name

4/20/2022  
Date

I certify that I am eligible to have access to Highly Sensitive Protected Material (HSPM) under the terms of the Protective Order in this docket.

/s/ Patricia Garcia  
Signature

PUC Staff  
Party Represented

Patricia Garcia  
Printed Name

4/20/2022  
Date

**If confidential information is not subject to a Protective Order**

I certify my understanding that the Confidential Materials provided to me may not be disclosed to anyone except as required by the provisions of the Texas Public Information Act, Texas Government Code Chapter 552, or other applicable law or court order.

/s/ Patricia Garcia  
Signature

PUC Staff  
Party Represented

Patricia Garcia  
Printed Name

4/20/2022  
Date

**Protective Order or Confidential Filing Certification**

**If confidential information is subject to a Protective Order**

I certify my understanding that the Protected Materials and/or Highly Sensitive Protected Material (HSPM) are provided to me pursuant to the terms and restrictions of the Protective Order in this docket and that I have received a copy of it and have read the Protective Order and agree to be bound by it. I understand that the contents of the Protected Materials and/or HSPM, any notes, memoranda, or any other form of information regarding or derived from the Protected Materials and/or HSPM shall not be disclosed to anyone other than in accordance with the Protective Order and unless I am an employee of the Commission or OPUC shall be used only for the purpose of the proceeding in Docket No. 52797. I acknowledge that the obligations imposed by this certification are pursuant to such Protective Order. Provided, however, if the information contained in the Protected Materials and/or HSPM is obtained from independent public sources, the understanding stated here shall not apply.

**/s/ William Abbott**

Signature

**William Abbott**

Printed Name

**PUC Staff**

Party Represented

**4/20/2022**

Date

I certify that I am eligible to have access to Highly Sensitive Protected Material (HSPM) under the terms of the Protective Order in this docket.

**/s/ William Abbott**

Signature

**William Abbott**

Printed Name

**PUC Staff**

Party Represented

**4/20/2022**

Date

**If confidential information is not subject to a Protective Order**

I certify my understanding that the Confidential Materials provided to me may not be disclosed to anyone except as required by the provisions of the Texas Public Information Act, Texas Government Code Chapter 552, or other applicable law or court order.

**/s/ William Abbott**

Signature

**William Abbott**

Printed Name

**PUC Staff**

Party Represented

**4/20/2022**

Date

**Protective Order or Confidential Filing Certification**

**If confidential information is subject to a Protective Order**

I certify my understanding that the Protected Materials and/or Highly Sensitive Protected Material (HSPM) are provided to me pursuant to the terms and restrictions of the Protective Order in this docket and that I have received a copy of it and have read the Protective Order and agree to be bound by it. I understand that the contents of the Protected Materials and/or HSPM, any notes, memoranda, or any other form of information regarding or derived from the Protected Materials and/or HSPM shall not be disclosed to anyone other than in accordance with the Protective Order and unless I am an employee of the Commission or OPUC shall be used only for the purpose of the proceeding in Docket No. 52797. I acknowledge that the obligations imposed by this certification are pursuant to such Protective Order. Provided, however, if the information contained in the Protected Materials and/or HSPM is obtained from independent public sources, the understanding stated here shall not apply.

**/s/ Robert Dakota Parish**

Signature

**Robert Dakota Parish**

Printed Name

**PUC Staff**

Party Represented

**4/22/2022**

Date

I certify that I am eligible to have access to Highly Sensitive Protected Material (HSPM) under the terms of the Protective Order in this docket.

**/s/ Robert Dakota Parish**

Signature

**Robert Dakota Parish**

Printed Name

**PUC Staff**

Party Represented

**4/22/2022**

Date

**If confidential information is not subject to a Protective Order**

I certify my understanding that the Confidential Materials provided to me may not be disclosed to anyone except as required by the provisions of the Texas Public Information Act, Texas Government Code Chapter 552, or other applicable law or court order.

**/s/ Robert Dakota Parish**

Signature

**Robert Dakota Parish**

Printed Name

**PUC Staff**

Party Represented

**4/22/2022**

Date



**Protective Order or Confidential Filing Certification**

**If confidential information is subject to a Protective Order**

I certify my understanding that the Protected Materials and/or Highly Sensitive Protected Material (HSPM) are provided to me pursuant to the terms and restrictions of the Protective Order in this docket and that I have received a copy of it and have read the Protective Order and agree to be bound by it. I understand that the contents of the Protected Materials and/or HSPM, any notes, memoranda, or any other form of information regarding or derived from the Protected Materials and/or HSPM shall not be disclosed to anyone other than in accordance with the Protective Order and unless I am an employee of the Commission or OPUC shall be used only for the purpose of the proceeding in Docket No. 52797. I acknowledge that the obligations imposed by this certification are pursuant to such Protective Order. Provided, however, if the information contained in the Protected Materials and/or HSPM is obtained from independent public sources, the understanding stated here shall not apply.

**/s/ Chelsey Moser**

Signature

**Chelsey Moser**

Printed Name

**PUC Staff**

Party Represented

**4/22/2022**

Date

I certify that I am eligible to have access to Highly Sensitive Protected Material (HSPM) under the terms of the Protective Order in this docket.

**/s/ Chelsey Moser**

Signature

**Chelsey Moser**

Printed Name

**PUC Staff**

Party Represented

**4/22/2022**

Date

**If confidential information is not subject to a Protective Order**

I certify my understanding that the Confidential Materials provided to me may not be disclosed to anyone except as required by the provisions of the Texas Public Information Act, Texas Government Code Chapter 552, or other applicable law or court order.

**/s/ Chelsey Moser**

Signature

**Chelsey Moser**

Printed Name

**PUC Staff**

Party Represented

**4/22/2022**

Date

**Protective Order or Confidential Filing Certification**

**If confidential information is subject to a Protective Order**

I certify my understanding that the Protected Materials and/or Highly Sensitive Protected Material (HSPM) are provided to me pursuant to the terms and restrictions of the Protective Order in this docket and that I have received a copy of it and have read the Protective Order and agree to be bound by it. I understand that the contents of the Protected Materials and/or HSPM, any notes, memoranda, or any other form of information regarding or derived from the Protected Materials and/or HSPM shall not be disclosed to anyone other than in accordance with the Protective Order and unless I am an employee of the Commission or OPUC shall be used only for the purpose of the proceeding in Docket No. 52797. I acknowledge that the obligations imposed by this certification are pursuant to such Protective Order. Provided, however, if the information contained in the Protected Materials and/or HSPM is obtained from independent public sources, the understanding stated here shall not apply.

**/s/ Ian Groetsch**

Signature

**Ian Groetsch**

Printed Name

**PUC Staff**

Party Represented

**4/22/2022**

Date

I certify that I am eligible to have access to Highly Sensitive Protected Material (HSPM) under the terms of the Protective Order in this docket.

**/s/ Ian Groetsch**

Signature

**Ian Groetsch**

Printed Name

**PUC Staff**

Party Represented

**4/22/2022**

Date

**If confidential information is not subject to a Protective Order**

I certify my understanding that the Confidential Materials provided to me may not be disclosed to anyone except as required by the provisions of the Texas Public Information Act, Texas Government Code Chapter 552, or other applicable law or court order.

**/s/ Ian Groetsch**

Signature

**Ian Groetsch**

Printed Name

**PUC Staff**

Party Represented

**4/22/2022**

Date