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STATEMENT OF DESIGNATION OF COUNSEL

Please use one form for each respondent.

MUR

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NAME OF COUNSEL: Karl Sandstrom and Ezra Reese

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The above-named individual is hereby designated as my counsel
and is authorized to receive any notifications and other communications
from the Commission and to act on my behalf before the Commission.

NEIL ABERCROMBIE

Print Name

11-1-04

Date

Neil Abercrombie

Signature

Asst. Dir. / Itc

U.S. Representative

Title

RESPONDENT'S NAME:

ADDRESS:

TELEPHONE: HOME()

BUSINESS()

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