

NON-DISCLOSURE AND DESTRUCTION AGREEMENT

By signing this document I agree and affirm that my name is _____ and that I own, work, or am employed by _____. I further agree and affirm that I have met with and provided information, advice, or services relating the Special Counsel's investigation pursuant to the Assembly Resolution to investigate elections in Wisconsin.

I understand that I cannot disclose information I learn from records or information provided to me related to the Special Counsel's investigation to any third party without express instructions from Special Counsel Michael J. Gableman. I understand that I must return or destroy **ALL** records provided to me by the Special Counsel upon the conclusion or termination of my services related to this case. I agree to hold any information I have in my possession that was provided by the Special Counsel in a secure environment. If that secure environment is an electronic storage system, that information will either be stored offline or in at least a 256-bit (AES or SSL) encrypted environment.

I understand that if I fail to comply with the terms of this agreement, I may be liable for monetary damages or attorney's fees and costs relating to my actions.

Signature

Printed Name

Date