Clean Energy Implementation Plan Appendix H Equity Advisory Group Member Interest Form

Avista Equity Advisory Group Interest Form

Introduction:

Washington's Clean Energy Transformation Act (CETA) passed by legislature in 2019 requires utilities to ensure an equitable distribution of energy benefits and a reduction of burdens on vulnerable populations and highly impacted communities.

There are many societal issues that run parallel with the desire to convert to a clean energy future. Based on your unique experience, please review the information below to indicate your interest in advising Avista in these matters.

Advisory Group Member Qualifications

- Knowledge, skills, and experience (lived and professional) to effectively represent your respective community/population/group.
- Capacity and willingness to serve as the conduit or intermediary between the Equity Advisory Group (EAG) and the entity you represent.
- Availability to attend regularly scheduled meetings

The following information collected will be used to understand your interest, ability and capacity to participate in the Equity Advisory Group as well as to track the experiences and communities/sectors that are represented.

Please submit completed forms by email to ana.matthews@avistacorp.com or by mail to: Avista

MSC-68

1411 E. Mission, Spokane WA 99202

| | | Member Information | | |
|-------------|-------------------------|------------------------------|-------|------------------|
| Full Name: | | | | Date: |
| | Last | First | M.I. | |
| Address: | | | | |
| | Street Address | | | Apartment/Unit # |
| | | | | |
| | City | | State | ZIP Code |
| Phone: | | Email Address: | | |
| Preferred m | nethod for communicatio | n (e.g. email, phone, etc.): | | |
| | | (0.9. 0, p, 0.0.) | | |
| | | | | |

| | Interest |
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| In wha | Actively participate as an EAG member Receive information/updates on the activities of the EAG Both actively participate and receive information/updates Other: |
| What | are your interests in joining Avista's Equity Advisory Group? |
| Are yo | ou interested in joining Avista's Energy Equity Advisory Group as an: (check all that apply and de)? |
| | Individual community member, leader, or worker who is interested in Washington State's Clean Energ Transformation law. |
| | Please describe: |
| | Partner from an organization, business, or union that serves communities or workers. |
| | Please describe: |
| | Partner from an industry, sector, or governmental agency. |
| | Please describe: |
| | Other with description: |
| How w | vill participating in the Group benefit your community/sector/organization? |
| | |
| | Experience |
| | e provide information about your background or experience that may inform ways to make vements to the following areas: (check all that apply) |
| | Employment |
| | Please describe: Housing |
| | Please describe: |
| | Transportation Please describe: |

□ Food insecurity

| | Please describe: | | | |
|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| | Health care | | | |
| | Please describe: | | | |
| | Language barriers | | | |
| | Please describe: | | | |
| | Other: | | | |
| | Description: | | | |
| Discoo | sidentify community offiliations in which you have necessal and/or professional experience. We | | | |
| | e identify community affiliations in which you have personal and/or professional experience. We stand there may be intersecting personal identities and/or professions. Select all that apply. | | | |
| | Community member, advocate and representative for people in congregate settings: people | | | |
| | experiencing homelessness, people who are detained/incarcerated, etc. | | | |
| | Community member, leader representing immigrant and refugee communities | | | |
| | Community member, leader representing individuals with disabilities | | | |
| | Community member, leader representing rural and frontier communities | | | |
| | Community member, leader representing the LGBTQIA+ community | | | |
| | Community member, leader representing the African American/Black communities | | | |
| | Community member, leader representing the Asian American communities | | | |
| | Community member, leader representing the Latinx communities | | | |
| | Community member, leader representing the Native Hawaiian and other Pacific Islander communities | | | |
| | Community member, leader representing American Indian/Alaska Native communities | | | |
| | Please note tribe: | | | |
| | Community based organization, please note which organization: | | | |
| | Community-led groups or coalition, please note group: | | | |
| | Faith based community | | | |
| | Local Health Jurisdiction | | | |
| | Academic partner, please note which institution: | | | |
| | Government Agency, please indicate: | | | |
| | Other | | | |
| | | | | |
| | Compensation | | | |
| Mo vo | ue and honor your time, and compensation may be available to you or your organization to cover the | | | |
| | your participation at Equity Advisory Group meetings. | | | |
| | | | | |
| | you like to be compensated for your time? | | | |
| | Yes | | | |
| | No Other access and (a) | | | |
| | Other comment(s): | | | |
| Participation | | | | |
| TI 0004 F ': A I : 0 | | | | |

The 2021 Equity Advisory Group meetings will be held on:

- May 13 at 7:30 to 8:30 am and 4:30 to 5:30 pm (please choose either meeting time on this date)
- June 17 at 1:00 to 3:30 pm
- July 20 and in September at times to be determined
- You may choose to attend public meetings for learning and input regarding the company's Clean Energy Implementation Plan on May 20, July 15, August 17 and September 1

| Are you able to attend the meetings? | |
|----------------------------------------------------------------------------|------------------------------------------------------------|
| Yes, I can attend all meetings. | |
| No, I can only attend the following meetings: _ | |
| □ No. I am not able to attend but I would like to | receive company updates and materials. |
| It is anticipated that Equity Advisory Group activity wi this year. | ll occur virtually (e.g. through Microsoft Teams and Zoom) |
| How can we best support you with virtual particip Language interpretation | ation? Please check all that apply: |
| ☐ Disability accommodations | |
| ☐ Technology assistance/accessibility (i.e. virtua | al platform training, phone conference, video) |
| ☐ Other | in platform training, priorite conference, video, |
| Please describe: | |
| 1 10000 00001100. | |
| Other | Comments |
| Please use this space to provide any additional comm | nents you would like to share here: |
| , , | · |
| | |
| | |
| | |
| | · |
| | |
| | |
| | |
| | |
| Signature: | Date: |