

STATEMENT OF APPOINTMENT CONDITIONS FOR SAUSAS

I, _____, hereby agree to the following as a condition to my appointment pursuant to 28 U.S.C. § 543 as a Special Assistant United States Attorney for the Southern District of Iowa to assist with: _____

1. If I require access to restricted information involving a matter other than that which I have been appointed, I shall request authorization from the United States Attorney.
2. I understand that the limitations of my access to the United States Attorney's Office is determined by the United States Attorney in that office.
3. I agree to sign a Grand Jury confidentially statement, as appropriate.
4. I attest that I have not been elected to public office.
5. I agree not to engage in the compensated outside practice of law or represent private clients while working as a Special Assistant United States Attorney.

Signature: _____

Date: _____