

SUPREME COURT OF THE STATE OF NEW YORK

COUNTY OF New York

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In the matter of the application of U.S. Bank National Association, et al.

Plaintiff(s)/Petitioner(s),

Index No. 652382/2014

-against-

Federal Home Loan Bank of Boston (intervenor), et al.

STIPULATION AND
CONSENT TO E-FILING

Defendant(s)/Respondent(s).
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We the undersigned, counsel in good standing representing parties in this matter, counsel admitted pro hac vice, and/or a self-represented party in this matter, hereby stipulate and consent to the use of the New York State Courts Electronic Filing System ("NYSCEF") in this case. We agree to be bound by the regulations governing the **NYSCEF** System (22 NYCRR §§ 202.5-b, 206.5, 206.5-aa, 207.4-a) and the procedures of the **NYSCEF** System as reflected in the *User's Manual* approved by the Chief Administrator of the Courts and posted on the **NYSCEF** website.

In addition, any of the undersigned who are not currently authorized e-filing users in the **NYSCEF** System hereby authorize the court/E-Filing Resource Center to apply for a user ID and password on their behalf. For this purpose, our signatures on this stipulation and consent shall be deemed our signatures on the User Registration Form posted on the **NYSCEF** website. **We understand that our respective primary e-mail addresses, listed below, will be used for service of documents.**

Dated: December 8, 2014

Registered User: Yes No
Attorney Pro Hac Pro se

Registered User: Yes No
Attorney Pro Hac Pro Se

/s Michael A. Rollin Signature

Signature

Michael A. Rollin Print Name

Print Name

W&L Investments, LLC
Attorney for (Identify party or parties)

Attorney for (Identify party or parties)

4848859
UCS Attorney Registration #

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(Optional) 3rd E-Mail _____ 3rd E-Mail
(Optional)

Registered User: [] Yes [] No
Attorney [] Pro Hac [] Pro Se []

Registered User: [] Yes [] No
Attorney [] Pro Hac [] Pro Se []

Signature _____ Signature

Print Name _____ Print Name

Attorney for (Identify party or parties)

Attorney for (Identify party or parties)

UCS Attorney Registration # _____

Firm Name _____ Firm Name

Address _____ Address

E-Mail _____ E-Mail
(Primary) (Primary)

2nd E-Mail _____ 2nd E-Mail
(Optional) (Optional)

3rd E-Mail _____ 3rd E-Mail
(Optional) (Optional)

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