U.S. Department of Justice

Acting United States Attorney
District of Idaho

Mailing Address:
1290 W. Myrtle St. Suite 500
Boise, ID 83702

Tel: 208/334-1211
FLU Fax: 208/334-9375
Civ Div Fax: 208/334-9375
Crim Div Fax: 208/334-1413
DTF Div Fax: 208/334-1413

December 21, 2021

Shata Stucky
Assistant Regional Counsel
Social Security Administration
Office of the Regional Chief, Region X
701 Fifth Avenue, Suite 2900 MS 221A
Seattle, WA 98104-7075

RE: Extension of SAUSA Appointment

Dear Ms. Stucky:

Your appointment as a Special Assistant United States Attorney for the District of Idaho is hereby extended. This extension, which is effective January 2, 2022, is subject to the conditions set forth in the original appointment letter. You will serve under this appointment for an additional period not to exceed January 1, 2024, unless extended. You will continue to serve without compensation other than that which you are now receiving under your existing appointment. No additional appointment papers are necessary.

Sincerely,

RAFAEL GONZALEZ
Digitally signed by RAFAEL GONZALEZ
Date: 2021.12.21 12:06:28 -07'00'

Rafael M. Gonzalez, Jr.
Acting United States Attorney

cc: Clerk of the Court

U.S. Department of Justice

United States Attorney
District of Idaho

Mailing Address:

800 E. Park Blvd. Suite 600
Boise, ID 83712-7788

Tel: 208/334-1211
FLU Fax: 208/334-9375
Civ Div Fax: 208/334-1414
Crim Div Fax: 208/334-1413
DTF Div Fax: 208/334-1413

January 2, 2020

Shata Stucky
Assistant Regional Counsel
Social Security Administration
Office of the Regional Chief, Region X
701 Fifth Avenue, Suite 2900 MS/901
Seattle, WA 98104-7075

RE: SAUSA Appointment

Dear Ms. Stucky:

Pursuant to 28 U.S.C. § 543, effective the date of this letter you are hereby appointed as a Special Assistant United States Attorney for the District of Idaho, subject to the following conditions:

1. You are appointed to assist the Office with Social Security cases.

2. The appointment expires on January 1, 2022, unless extended.

3. You will report to and act under the direction of Criminal Chief or Civil Chief at the U.S. Attorney's Office/District of Idaho with regard to any matters handled.

4. You understand and agree to serve without compensation other than that which you are now receiving under your existing appointment.

5. This appointment may be terminated at any time without cause or notice.

6. You must execute and return to the Personnel Staff within 14 days the enclosed Appointment Affidavit containing the oath of office, Statement of Appointment Conditions, and a signed copy of this letter. Your signature in the space provided below acknowledges your agreement to the terms and conditions of this appointment.

Sincerely,

Bart M. Davis
United States Attorney

cc: Clerk of the Court

The foregoing terms and conditions are hereby agreed to and accepted:

Shata L. Stucky

1/8/2020
Date:

APPOINTMENT AFFIDAVITS

Special Assistant U.S. Attorney
(Position to which Appointed)

01/02/2020
(Date Appointed)

Department of Justice
(Department or Agency)

U.S. Attorney's Office
(Bureau or Division)

Seattle, WA
(Place of Employment)

I, Shata Stucky, do solemnly swear (or affirm) that--

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter. So help me God.

B. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof.

C. AFFIDAVIT AS TO THE PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing this appointment.

(Signature of Appointee)

Subscribed and sworn (or affirmed) before me this 8 day of January, 2020

at Seattle (City) Washington (State)

(SEAL)

(Signature of Officer)

Commission expires 02/03/2022
(If by a Notary Public, the date of his/her Commission should be shown)

Notary
(Title)

Note - If the appointee objects to the form of the oath on religious grounds, certain modifications may be permitted pursuant to the Religious Freedom Restoration Act. Please contact your agency's legal counsel for advice.

STATEMENT OF APPOINTMENT CONDITIONS

I, Shata Stucky , hereby agree to the following as a condition to my appointment pursuant to 28 U.S.C. section 543 as a Special Attorney for the District of Idaho to assist with:

Social Security Administration Cases

1. If I require access to restricted information involving a matter other than that to 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.

Signature: _____

Date: January 2, 2020

Attorney's Bar Certification

☐ Initial Background Investigation
☐ Periodic Reinvestigation

I, Shata Ling Stucky (Full Name), understand that each Department of Justice attorney must maintain an an "active" membership in the bar of at least one State, territory, or the District of Columbia. I hereby certify that I am an "active" member of the bar in Washington (State, Territory, or District of Columbia) and that my bar membership number (if any) is 39963 (Number). I further understand that failure on my part to maintain an "active" bar membership at any time during my employment as an attorney at the Department of Justice may result in my pay being withheld and subject me to possible disciplinary action.

In addition, for purposes of my background investigation, I hereby certify that, in addition to being an "active" member of the bar in the jurisdiction identified above, I am a member of the Bar of each State or territory listed below:

State, Territory or District of Columbia Bar Membership			Membership Status (For each State listed you must check one)	
State	Number, if applicable	Date of Admission	Active	Inactive

Have you illegally used any drug or controlled substance (including any prescription drug not prescribed to you) since becoming a member of the Bar of any State, territory, or the District of Columbia? ☐ YES ☒ NO

Signature: Shata Stucky Digitally signed by Shata Stucky Date: 2020.01.21 14:12:05 -08'00'

Date: _____

FORM DOJ-54
Revised October 2016

REMINDER OF GOVERNMENT ATTORNEY ETHICAL OBLIGATIONS TO CLIENT

As an appointed Special Assistant United States Attorney (SAUSA), it is important for you to remember that you are an attorney representing a client (in most circumstances, the Executive Branch of the United States or the Department), with all the professional responsibilities that entails. Indeed, 28 U.S.C. § 530B mandates that attorneys for the Government comply with applicable State laws and rules, and Federal court rules, governing attorneys. It is therefore important for you to reacquaint yourself with the laws and rules of professional conduct adopted by the jurisdictions in which you are licensed and in which you practice.

For instance, among an attorneys professional obligations is the obligation to protect confidential client information. This obligation is established in state bar rules analogous to Rule 1.6, American Bar Association Model Rules of Professional Conduct. As a Department of Justice SAUSA, you, like any attorney, have an obligation to safeguard information and documents relating to the representation of your client. While you are permitted to make certain disclosures during the course of your work, the disclosures are limited. These limitations primarily result from your obligations under the rules of professional conduct and Executive Branch policies on disclosure of government information, but other laws, rules and privileges may also apply. Moreover, some disclosures require approval from your United States Attorney or someone at a higher level within the Department of Justice or Executive Branch, depending on the nature of the information sought to be disclosed. Keep in mind that your duty of confidentiality does not end when your SAUSA appointment is terminated.

Your signature below serves as an acknowledgment that you understand your obligation to determine and comply with the laws, rules of professional conduct, Department policies, or other rules that define your obligations to your client in the assignments you take on as a SAUSA. If you have questions about your obligations under the applicable rules of professional conduct, please contact the Professional Responsibility Officer (PRO) in your office or the Professional Responsibility Advisory Office (PRAO). Questions about your obligations arising from laws and regulations defining Executive Branch standards of conduct should be directed to the General Counsel's Office of the Executive Office for United States Attorneys or the Ethics Officer in your office. Questions about other law, policy, or regulation should be directed to EOUSA GCO.

Shata Stucky Digitally signed by Shata Stucky Date: 2020.01.21 14:09:48 -08'00'

Signature

Date

OARM - 9B
Revised March 2018

Printed Name

These provisions are consistent with and do not supersede, conflict with, or otherwise alter the employee obligations, rights, or liabilities created by existing statute or Executive order relating to (1) classified information, (2) communications to Congress, (3) the reporting to an Inspector General of a violation of any law, rule, or regulation, or mismanagement, a gross waste of funds, an abuse of authority, or a substantial and specific danger to public health or safety, or (4) any other whistleblower protection. The definitions, requirements, obligations, rights, sanctions, and liabilities created by controlling Executive orders and statutory provisions are incorporated into this agreement and are controlling.