BEFORE THE BOARD OF RETIREMENT OF THE ORANGE COUNTY EMPLOYEES RETIREMENT SYSTEM

| In Re: | Case No.: |
|--|---|
| Petitioner. | NOTICE OF APPEARANCE BY AN ATTORNEY/ SUBSTITUTION OF ATTORNEY |
| | Hearing Officer: |
| Part I. Notice of Appearance by an Attorn | <u>ey</u> |
| I hereby enter my appearance as attorney on behalf of | |
| Part II. Eligibility | |
| [] I am a member in good standing of the S | State Bar of California. My State Bar Number is |
| | OR |
| [] I am eligible to represent my client pro I | hac vice under Rule 9.40 of the California Rules of Court. |
| I am admitted to the Bar in the s | itate of |
| Sponsoring attorney: | , California State Bar Number: |
| I am not subject to any order of any court restraining, or otherwise restricting me in | or administrative agency disbarring, suspending, enjoining, the practice of law. |
| Part II. Attorney Information | |
| Attorney's Name: | |
| Attorney's Firm Name: | |
| | |
| | |
| Attorney's E-Mail Address: | |

Part III. Additional Authorized Electronic Filers

(Use separate sheet for any additional names, if necessary)

| A. | Electronic Filer's Name: |
|----|------------------------------------|
| | Electronic Filer's E-Mail Address: |
| В. | Electronic Filer's Name: |
| | Electronic Filer's E-Mail Address: |
| C. | Electronic Filer's Name: |
| | Electronic Filer's E-Mail Address: |
| | |

Part IV. Substitution of Attorney

[] I am replacing the attorney of record in this matter

Name of former attorney:_____

Part V. Signature of New Attorney

I have read and understand the Adjudication Policy and Administrative Hearing Rules of the Orange County Board of Retirement. I declare under penalty of perjury under the laws of the State of California and the United States that the information I have provided on this form is true and accurate.

Dated:

Signature of Attorney

Part VI. Signature of Former Attorney

I consent to this substitution.

Dated:

Signature of Former Attorney