

SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF PLACER

ATTORNEY OR UNREPRESENTED PARTY (Name, State Bar number, and Address): TELEPHONE NO.: FAX NO.: EMAIL ADDRESS:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF PLACER 10820 Justice Center Drive P.O. Box 619072 Roseville, CA 95661-9072	
APPELLANT: RESPONDENT:	
NOTICE RE ORAL ARGUMENT	CASE NUMBER:

I, _____, declare as follows:

1. I am the appellant counsel for appellant respondent counsel for respondent in this action.
2. Oral argument before the Appellate Division is currently set for: _____.
3. Pursuant to California Rules of Court, Rules 8.885(d), 8.929(d), I agree to waive oral argument and submit the matter based upon the briefs currently before the Appellate Division. I understand that oral argument will not be held except upon the invitation of the Appellate Division.
4. I do not agree to waive oral argument.

I declare under the penalty of perjury of the laws of the State of California that the foregoing is true and correct.

DATE:

 PRINTED NAME _____
 SIGNATURE

FOR COURT USE ONLY

RECEIVED ON: _____

RESPONSES RECEIVED FROM: APPELLANT DATE:
 RESPONDENT DATE:

ORAL ARGUMENT: VACATED ON: _____
 STILL SCHEDULED; ALL PARTIES DID NOT WAIVE
 STILL SCHEDULED; PENDING RESPONSE FROM: APPELLANT RESPONDENT

Jake Chatters, Clerk of the Placer County Superior Court

DATED: _____ By: _____, Deputy Clerk