ATTORNEY OF RECORD: Keith W. Lemieux, Jr. Lemieux & O'Neill Telephone NO: 805-495-4770 Fax No: 805-495-2787 State Bar No. _____ ATTORNEY FOR (Name): Defendant(s), Little Rock Creek Irrigation District, et. al.	**DO NOT FILE WITH COURT** **COMPLETELY FILL OUT/CORRECT FORM BEFORE SUBMITTING TO COURTCALL!!** CourtCall ID#: 2463050
Santa Clara County Superior Court	
Case Name: Antelope Valley Groundwater Litigation	**CASE NUMBER: 105CV049053** **DEPARTMENT:** **17C/Judge Jack Komar** **DATE/TIME: Friday, October 24th, 2008/8:30 AM** **HEARING: Conference**
REQUEST FOR COURTCALL TELEPHONIC APPEARANCE	Our Tax ID#: 95-4568415

1. _____(Name of specific attorney appearing telephonically) requests a CourtCall telephonic calendar appearance at the above referenced proceeding and agrees to provisions of the Rule/Order/Procedure Re: CourtCall Telephonic Appearances. I UNDERSTAND THAT **I DIAL** INTO THE CALL FIVE MINUTES BEFORE ITS SCHEDULED START TIME. **COURTCALL DOES NOT DIAL OUT TO ME.**
2. Not less than 3 Court days or 4:00 PM on the Court day prior to the hearing if the department posts tentative rulings , a copy of this document was served on all other parties and faxed to CourtCall, Telephonic Appearance Program Administrator at (310) 743-1850 OR (888) 88-FAXIN .
3. The CourtCall Appearance Fee in the sum of $60.00 (plus additional fee of $.00 if late filing is accepted) paid as follows:
__Check - (copy attached-**write CourtCall ID# on check**-and faxed to CourtCall at (310) 743-1850 or (888) 88-FAXIN) payable to Telephonic Hearing Account and original mailed to CourtCall at 6383 Arizona Circle, Los Angeles, CA 90045, telephone (310) 342-0888 or (888) 88-COURT. **INDIVIDUALS REPRESENTING THEMSELVES MUST PAY BY CREDIT CARD!**
__Charged - to CourtCall Debit Account No.:_____
__Charged - to VISA, Mastercard or American Express:

To be completed only on the copy submitted to CourtCall, LLC:

Credit Card Number:_____Expiration Date:_____

To pay by credit card, the copy of this form submitted to CourtCall, LLC must be signed by the person whose credit card is to be charged and must be **faxed** to CourtCall at (310) 743-1850 or (888) 88-FAXIN with the above credit card information completed. The signature below constitutes authorization to charge the above referenced credit card.

_____ _____

Type Name Signature

4. Request forms are processed within 24 hours of receipt. Call CourtCall if you do not receive a faxed Confirmation within 24 hours. WITHOUT A WRITTEN CONFIRMATION YOU ARE NOT ON THE COURTCALL CALENDAR AND MAY BE PRECLUDED FROM APPEARING TELEPHONICALLY! COURTCALL'S LIABILITY CONCERNING THIS TELEPHONIC APPEARANCE IS LIMITED TO THE FEE PAID TO COURTCALL. Matters continued at the time of the hearing require a new form and a new fee for the continued date. It is counsel's responsibility to notify CourtCall of any continuance or cancelation, prior to the scheduled hearing time by calling (888) 882-6878.
5. ***MY SIGNATURE ON THIS DOCUMENT SERVES AS CONSENT FOR COURTCALL TO CONTINUE TO FAX (AT THE FAX NUMBER LISTED ABOVE UNDER "ATTORNEY OF RECORD") OR EMAIL NOTICES TO ME OR MY FIRM ADVISING OF UPCOMING APPEARANCES AND/OR OTHER OFFERINGS FROM COURTCALL UNTIL I OR MY FIRM ADVISES COURTCALL OTHERWISE.***

Date: _____ Signature: _____