

## NOTICE OF INTENT TO APPEAR FORM

(name of party or participant) Jasbir S. Gill, M.D. plans to participate in the water right hearing regarding the

(name of respondent and enforcement action) \_\_\_\_\_

**scheduled to commence on  
February 13, or March 10, 2017**

**1) Check only one (1) of the following two boxes:**

- I/we intend to participate by cross-examination or rebuttal only. (Includes opening statement.)
- I/we plan to call the following witnesses to testify at the hearing: (Includes opening statement, cross-examination, and rebuttal.) **(At least one (1) row of Table below must be fully completed if this box is checked.)**

NAME	SUBJECT OF PROPOSED TESTIMONY	ESTIMATED LENGTH OF DIRECT TESTIMONY	EXPERT WITNESS (YES/NO)

(If more space is required, please add additional pages.)

**2) Fill in the following information of the Participant, Party, Attorney, or Other Representative:**

Name (Type or Print): Jasbir S. Gill, M.D.

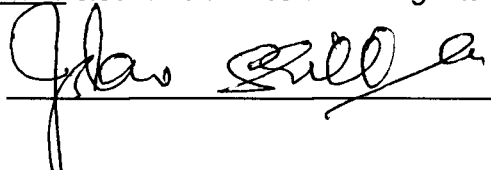
Mailing Address: P.O. Box 1450, Lodi CA 95241

Phone Number: 209-334-6583 Fax Number: 209-334-2416

E-mail Address: gillmed@sbcglobal.net

Optional:

- I/we decline electronic service of hearing-related materials.

Signature:  Dated: 12-29-16