	NOTICE	OF INTENT TO AP	PEAR	
Westlands Water		_ plansto participate in	the water right hea	aring regarding
(name of party or part	icipant)			
		ease and Desist Orde Against Side Irrigation District	r	
Th	ursday, November	Hearing will commend 12, 2015 and continue ember 13 and 16, 201 at 9:00 a.m.	e, if necessary,	
	ent a policy statem cipate by cross-exa			owing Table)
NAME	SUBJECT OF PRO	OPOSED TESTIMONY	ESTIMATED LENGTH OF DIRECT TESTIMONY	EXPERT WITNESS (YES/NO)
(If more space is requi	ired, please add ad	dditional pages or use	reverse side.)	
Representative:	llip Williams	he Participant, Party, of Westlands W	ater District	; Daniel O'Ha
N.A 110		oyd of Kronick th Floor, Sacran		
Phone Number: (916)		321-4500 Fax Numl	•	
E-mail: pwilliams@we	estlandswater.o	rg; dohanlon@kmtg.	com; rakroyd@kmt	g.com

Optional:

☐ I/we <u>decline</u> electronic service of hearing-related materials.