| Case 3:73-cv-001 | IN THE UNITED STATES DI | 4 Page 1 of 2 // FD |
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| 2 | IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF NEVADA CLERK ILSON | |
| 3 | UNITED STATES OF AMERICA, | DEPUT |
| 4 | Plaintiff, | |
| 5 | WALKER RIVER PAIUTE TRIBE, | IN EQUITY NO. C-125 |
| . 6 | Plaintiff-Intervenor, | SUBFILE NO. C-125-B |
| 7 | vs. | |
| 8 | WALKER RIVER IRRIGATION DISTRICT, | |
| 9 | NOTICE OF APPEARANCE AND INTENT TO PARTICIPATE | |
| 10 | NOTICE OF AFTERIOR OF THE | · · - · |
| 11 | I hereby enter my appearance in this sub-proceeding in this case. I am filing this document with the District Court at the following address: | |
| 12 | | |
| 1 <u>.</u> 5 | Chief Deputy Clerk United States District Court for the | |
| 14 | District of Nevada 400 South Virginia Street, Suite 301 | |
| 15 | Reno, Nevada 89501 | |
| 16 | 3. In the envelope provided for return of my Waiver of Service of Notice in Lieu of | |
| 17 | Summons. I am mailing a copy of this document to: | |
| 28 | Susan L. Schneider Attorney for the United States of America United States Department of Justice Environment & Natural Resources Division P.O. Box 756 Littleton, Colorado 80160 4. I (or the entity on whose behalf I am acting) will retain all defenses or objection | |
| 19 | | |
| 20 | | |
| 21 | | |
| 22 | 4. I (or the entity on whose behalf I am acting) will retain an defended of the lawsuit or to the jurisdiction or venue of the court except for objections based on a defe | |
| 23 | in the Notice in Lieu of Summons or in the service of the Notice in Lieu of Summons. | |
| 24 | have retained an attorney to represe | |
| 25 | me in these proceedings, I identify that attorney below, along with his or her mailing address | |
| 26 | | |
| 27 | telephone number, and facsimile number: | |
| 28 | | mrgraame nage 1 of 2 |
| | NOTICE OF APPEARANCE AND INTENT TO PAR | TICIPATE, page 1 01 2 |

0127-MMD-CSD Document 369 Filed 08/20/2004 Page 2 of 2 Case 3:73-cv-0 Attorney: Gordon DeParli Address: 6100 Neil Rd Sinte 500. Runo NV 89511 Phone Number: Fax Number: (Signature) (Printed or typed Name) 1.3 Stwen A Fulstone 1989 Living Tre (Entity, if any, on whose behalf you are appearing) (Address) (Telephone number)