## UNITED STATES DISTRICT COURT

| Northern  |  | District of                |                 | California   | California   |  |
|---|--|----------------------------|-----------------|--|--------------|--|
| Kip Sides<br>V.<br>Cisco Systems, Ind   | Plaintiff (s), c., et al. Defendant (s), | SUE                        | STITUTI         | RDER GRANTING ON OF ATTORNEY  4:15-cv-03893-HSG              |              |  |
| Notice is hereby giver  | that, subject to appro-                  | val by the court,          | UnitedHe        | althcare Insuance Company (Party (s) Name)                   | substitutes  |  |
| Nicole E. Wurscher  |  | , Sta                      | te Bar No.      | 245879 as counsel of   | of record in |  |
| (Name of  | New Attorney)                            |                            |                 |  |              |  |
| place of Robert Bohner and Edward Stumpp of Hinshaw & Culbertson LLP  (Name of Attorney (s) Withdrawing Appearance) |  |                            |                 |  |              |  |
|   | (Nam                                     | ne of Attorney (s) Without | Irawing Appeara | ance)  |              |  |
| Contact information for new c   | ouncel is as follows:                    |                            |                 |  |              |  |
| Firm Name:  | Walraven & Westerfe                      | ld I I P                   |                 |  |              |  |
|   |  |                            |                 |  |              |  |
| Address:  |  | 510                        |                 |  |              |  |
| Telephone:  | (949) 215-1990                           |                            | _Facsimile      | (949) 215-1999   |              |  |
| E-Mail (Optional):  | new@walravenlaw.co                       | om                         |                 |  |              |  |
| I consent to the above substitu   | _  | 6                          | -1.6            |  |              |  |
| Date: 10/31/  | ′2018                                    |                            |                 |  |              |  |
| I consent to being substituted.  Date: ///05/   | /18                                      | -<br>-<br>-                | H               | (Signature of Party (s))  (Signature of Former Attorney (s)) | 0            |  |
| I consent to the above substitu   | ition                                    |                            |                 |  |              |  |
|   |  |                            | MI              | 010  |              |  |
| Date: 10/31   | 72010                                    | -                          |                 | (Signature of New Attorney)                                  |              |  |
| The substitution of attorney is   | hereby approved and s                    | so ORDERED.                |                 |  | <b>A</b>     |  |
| Date: 3/12/20   | )19                                      | -                          | Ho              | ywood S. Sell  | <u></u>      |  |

[Note: A separate consent order of substitution must be filed by each new attorney wishing to enter an appearance.]