

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number: 05 CV 0208

UNITED STATES EQUAL EMPLOYMENT
OPPORTUNITY COMMISSION

v.

SIDLEY AUSTIN BROWN & WOOD LLP

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:
SIDLEY AUSTIN BROWN & WOOD LLP

NAME (Type or print) Michael P. Conway	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ Michael P. Conway	
FIRM Grippo & Elden LLC	
STREET ADDRESS 111 S. Wacker Drive	
CITY/STATE/ZIP Chicago, IL 60606	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 6201032	TELEPHONE NUMBER (312) 704-7749
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	

CERTIFICATE OF SERVICE

I, Michael P. Conway, hereby certify that on **April 5, 2006**, I caused a true and complete copy of the foregoing **APPEARANCE (for Michael P. Conway of Grippo & Elden LLC)** to be served by Electronic Mail Transmission via ECF as to Filing Users upon the following:

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