

IN THE COURT OF APPEAL OF THE STATE OF CALIFORNIA
SECOND APPELLATE DISTRICT
JOSEPH A. LANE, CLERK

DIVISION 2 May 14, 2014

C. D. Michel
Michel & Associates, P. C.
180 E. Ocean Blvd.
Suite 200
Long Beach, CA 90802

JOHN RANDO et al.,
Petitioners and Appellants,
v.
KAMALA HARRIS,
Respondent;
FRANK QUINTERO,
Real Party in Interest and Respondent.
B254060 / BS145904

Division Two has ordered this case on calendar for oral argument on June 20, 2014 at 09:00 AM. Although it is possible that the panel will change, the following justices are presently assigned to hear the case: Ashmann-Gerst, Chavez, Ferns.

PLEASE COMPLETE THIS FORM AND RETURN IT PROOF OF SERVICE ON ALL INTERESTED PARTIES IMMEDIATELY. IF IT IS NOT RECEIVED WITHIN TEN (10) DAYS FROM THE DATE SHOWN ABOVE, **YOU WILL BE DEEMED TO HAVE WAIVED ORAL ARGUMENT.** If you are disposed to waive oral argument, we request that you arrange with your adversary for a mutual waiver of oral argument. The Court asks you to remember that, although the Court welcomes oral argument, the justices will have reviewed your case prior to the oral argument hearing; therefore repetition of the facts or contents of your briefs is not helpful.

1. Is this case ready for submission by you without oral argument? _____
(If the answer is "YES", then sign & return this form.)
2. If oral argument is necessary, how much time do you need? _____

PLEASE NOTE: Oral argument is governed by California Rules of Court, Rule 8.256. The maximum amount of time allowed for oral argument is 30 minutes for each side. Most cases require much less time. Division Two's calendar is compiled according to the time requested by the parties, with the cases having the shorter time requests given preference at the beginning of the calendar and those with the longer requests set at the end of the calendar. Revised estimates will not be solicited at the hearing. If the parties are in serious settlement negotiations, please advise the court as soon as possible.

3. Name of the attorney who will argue this case: _____
4. Name of the law firm: _____

Signed: _____ Telephone# _____

Attorney for: _____

Complete and return this form, electronically, with proof of service to: www.courts.ca.gov/2dca, click on e-file

* or via U.S. Mail to: Clerk, Court of Appeal, Second Appellate District, Division Two, 300 So. Spring St.,
Suite 2217, Los Angeles, CA. 90013