## NOTICE OF INTENT TO APPEAR

Nathan Dawood	plans to pa	articipate in t	he water right hea	aring regarding
(name of party or part				
	Draft Cease and Desist Orde and Administrative agains Younan A Dawood & S	Civil Liability t		
	scheduled to co Tuesday, July at 9:00 a	22, 2014		
	sent a policy statement only.			
I/we decline electr	icipate by cross-examination onic service of hearing-relate e following witnesses to testif	d materials.		
NAME	SUBJECT OF PROPOSED TO	ESTIMONY	ESTIMATED LENGTH OF DIRECT TESTIMONY	EXPERT WITNESS (YES/NO)
-	N	-		
		1		
		· ·		
(If more space is requ	ired, please add additional pa	ges or use r	everse side.)	
Name, Address, Phon	e Number and Fex Number o		Other Represent	ative:
	nan Dawood			
Mailing Address: <u>PO Bo</u>	x 393		e Takka	
East In	vine, CA 92650			
Phone Number: ()	949 354 1475	Fax Numb	per: ( ) 866 7	92 8469

ANDCEO@Gmail.com