

WAIVER

SUPREME COURT OF THE UNITED STATES

Supreme Court Case No. 17-847

Home Care Providers, Inc., et al.

(Petitioner)

v. Kelly Hemmelgarn, et al.

(Respondent)

I DO NOT INTEND TO FILE A RESPONSE to the petition for a writ of certiorari unless one is requested by the Court.

Please check one of the following boxes:

- ☒ Please enter my appearance as Counsel of Record for all respondents.
- ☐ There are multiple respondents, and I do not represent all respondents. Please enter my appearance as Counsel of Record for the following respondent(s):

I certify that I am a member of the Bar of the Supreme Court of the United States (Please explain if your name has changed since your admission):

Signature 

Date: 1/18/18

(Type or print) Name Stephen R. Creason

☒ Mr. ☐ Ms. ☐ Mrs. ☐ Miss

Firm Office of the Attorney General

Address Indiana Government Center South, 302 W. Washington Street, Fifth Floor

City & State Indianapolis, IN Zip 46204

Phone 317-232-6222

A COPY OF THIS FORM MUST BE SENT TO PETITIONER'S COUNSEL OR TO PETITIONER IF *PRO SE*. PLEASE INDICATE BELOW THE NAME(S) OF THE RECIPIENT(S) OF A COPY OF THIS FORM. NO ADDITIONAL CERTIFICATE OF SERVICE IS REQUIRED.

SEE REVERSE FOR INFORMATION CONCERNING THE STATUS OF A CASE ON THE DOCKET.

CC: Arend J. Abel

COHEN & MALAD, LLP One Indiana Square, #1400
Indianapolis, IN 46204