

WAIVER

SUPREME COURT OF THE UNITED STATES

Supreme Court Case No. 17-8616

Pamela Suzanne Harnden

(Petitioner)

v.

Mich. Dep't of Health & Human Servs., 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):

William Weston; Joseph Linert; Jennifer Hutkowski; Marnie DeBell; Sarah Meddaugh;

Kim Irwin; Chiquita Ford-White; Samantha Pietrykowski; Mandy Dalrymple; Amy Sherrod

Christina Moses, Jennifer Henderson, Melisa Hazen

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

Aaron D. Lindstrom

Date:

5/24/18

(Type or print) Name Aaron D. Lindstrom

☒ Mr.

☐ Ms.

☐ Mrs.

☐ Miss

Firm Michigan Department of Attorney General

Address Post Office Box 30212

City & State Lansing, Michigan

Zip 48909

Phone (517) 373-1124

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: Pamela Suzanne Harnden
8707 Duce Rd, Avoca, MI 48006