WAIVER

SUPREME COURT OF THE UNITED STATES

			No.	22-951					
Jane Doe No. 1, et al.				reference in the desired to all	Todd Rokita, et al.				
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Please	check	the appropria	ate box	· a					
\odot	I am filing this waiver on behalf of all respondents.								
0	I only 1	nly represent some respondents. I am filing this waiver on behalf of the following respondent(s):							
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Signature:		Meumon							
Date:		4-10-23							
(Type or print) Name Thomas M. Fisher							a di didebi di madabi di m		
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Firm		Office of the Attorney General							
Address		302 West Washington St., IGC South, 5th Floor							
City & State		Indianapol	is, IN				Zip	46204	
Phone		(317) 232-6255 Email				Tom.Fisher@atg.in.gov			
A copy name(s	of this f s) of the	orm must be se recipient(s) of a	ent to pe a copy o	etitioner's cou f this form. N	nsel or to o addition	petitioner if pro aal certificate of s	se. Pleas service or	e indicate below the cover letter is required.	
cc:								Average App	