

**UNITED STATES COURT OF APPEALS
FOR THE NINTH CIRCUIT
Form 1. Notice of Appeal from a Judgment or Order of a
United States District Court**

Name of U.S. District Court:

U.S. District Court case number:

Date case was first filed in U.S. District Court:

Date of judgment or order you are appealing:

Fee paid for appeal? (*appeal fees are paid at the U.S. District Court*)

Yes No IFP was granted by U.S. District Court

List all Appellants (*List each party filing the appeal. Do not use "et al." or other abbreviations.*)

Rachel Condry; Jance Hoy; Christine Endicott; Laura Bishop; Felicity Barber; Rachel Carroll; and, Teresa Harris, on behalf of themselves and all others similarly situated

Is this a cross-appeal? Yes No

If Yes, what is the first appeal case number?

Was there a previous appeal in this case? Yes No

If Yes, what is the prior appeal case number?

Your mailing address:

Chimicles Schwartz Kriner & Donaldson-Smith LLP

341 W. Lancaster Avenue

City: State: Zip Code:

Prisoner Inmate or A Number (if applicable):

Signature Date

Complete and file with the attached representation statement in the U.S. District Court

Feedback or questions about this form? Email us at forms@ca9.uscourts.gov

**UNITED STATES COURT OF APPEALS
FOR THE NINTH CIRCUIT**

Form 6. Representation Statement

Instructions for this form: <http://www.ca9.uscourts.gov/forms/form06instructions.pdf>

Appellant(s) (List *each* party filing the appeal, do not use “et al.” or other abbreviations.)

Name(s) of party/parties:

Rachel Condry; Jance Hoy; Christine Endicott; Laura Bishop; Felicity Barber; Rachel Carroll; and, Teresa Harris, on behalf of themselves and all others similarly situated

Name(s) of counsel (if any):

Kimberly M. Donaldson-Smith

Address: 361 W. Lancaster Avenue

Telephone number(s): 610-642-8500

Email(s): kmd@chimicles.com

Is counsel registered for Electronic Filing in the 9th Circuit? Yes No

Appellee(s) (List only the names of parties and counsel who will oppose you on appeal. List separately represented parties separately.)

Name(s) of party/parties:

UnitedHealth Group, Inc.; UnitedHealthcare, Inc.; United Healthcare Insurance Company; United HealthCare Services, Inc.; UMR, Inc.

Name(s) of counsel (if any):

Raymond A. Cardozo

Address: 101 Second St., Suite 1800, San Francisco, CA 94105

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To list additional parties and/or counsel, use next page.

Feedback or questions about this form? Email us at forms@ca9.uscourts.gov

Continued list of parties and counsel: *(attach additional pages as necessary)*

Appellants

Name(s) of party/parties:

Name(s) of counsel (if any):

Please see attached page for additional counsel for Appellants

Address:

Telephone number(s):

Email(s):

Is counsel registered for Electronic Filing in the 9th Circuit? Yes No

Appellees

Name(s) of party/parties:

Name(s) of counsel (if any):

Please see attached page for additional counsel for Appellees

Address:

Telephone number(s):

Email(s):

Name(s) of party/parties:

Name(s) of counsel (if any):

Address:

Telephone number(s):

Email(s):

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UNITED STATES COURT OF APPEALS FOR THE NINTH CIRCUIT
Form 6. Representation Statement

Addendum

Condry, et al v. UnitedHealth, Case No 3:17-cv-00183-VC (USDC N.D. Cal)

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