

Short Title: _____ Docket No.: _____

Substitute, Additional, or Amicus Counsel's Contact Information is as follows:

Name: _____

Firm: _____

Address: _____

Telephone: _____ Fax: _____

E-mail: _____

Appearance for: _____

(party/designation)

Select One:

Substitute counsel (replacing lead counsel: _____)
(name/firm)

Substitute counsel (replacing other counsel: _____)
(name/firm)

Additional counsel (co-counsel with: _____)
(name/firm)

Amicus (in support of: _____)
(party/designation)

CERTIFICATION

I certify that:

I am admitted to practice in this Court and, if required by Interim Local Rule 46.1(a)(2), have renewed
my admission on _____ OR

I applied for admission on _____.

Signature of Counsel: _____

Type or Print Name: _____

Parties filing Amicus Brief

The Patrolmen's Benevolent Association of the City of New York, Inc.

The Detectives Endowment Association, Police Department, City of New York, Inc.

The Lieutenants Benevolent Association of the City of New York, Inc.

The Captains' Endowment Association of New York