

FEDERAL TRADE COMMISSION  
WASHINGTON, D.C. 20580

# NOTICE OF APPEARANCE



**ORIGINAL**

**CASE NAME**

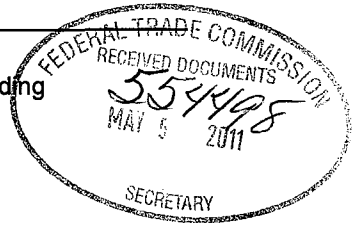
In the Matter of ProMedica Health System, Inc.

**FILE/DOCKET NUMBER**

Docket 9346

► Pursuant to Section 4.1 of the Commission's Rule of Practice, enter in the above proceeding the appearance of

- counsel or representative for the respondent (Complete items 1, 2, 4, and 5 below)
- counsel supporting the complaint (Complete items 1, 3, 4, and 5 below)



**1. COUNSEL OR REPRESENTATIVE**

Include name, address and telephone of each

Jeremy W. Dutra, Esq.  
Squire, Sanders & Dempsey (US) LLP  
Suite 500  
1201 Pennsylvania Avenue NW  
Washington, D.C. 20004  
(202) 626-6600

**2. RESPONDENTS**

Include address and telephone numbers of all persons, partnerships, corporations, or associations

(Non-Party)  
Medical Mutual of Ohio  
2060 E. 9th Street  
Cleveland, OH 44115  
216-687-7000

**3. ASSOCIATE/ASSISTANT DIRECTOR**

**4. SIGNATURE OF SENIOR COUNSEL**

**5. DATE SIGNED**

5/5/11

Return this form to:

H-135  
Federal Trade Commission  
600 Pennsylvania Ave. NW  
Washington, D.C. 20580