

NEW BUSINESS FORM

0443773-0000B

KATZ, RANDY
METHODS AND APPARATUS FOR EXTENDED GAME PLA
12/10/2002 NB-LITIGATION
CP: MURPHY, DAVID B
PC: MURPHY, DAVID B
BP: MURPHY, DAVID B

New Business Forms

Clip #: 1
Vol:



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O'MELVENY & MYERS LLP NEW MATTER FORM

Client Number:

443,773 - 009

LITIGATION DEPARTMENT

DEC 10 2002

A new matter will not be opened (other than as pending) unless a Conflict of Interest Inquiry Report on the parties related to this matter has been reviewed, any required consents have been obtained and the executed form has been returned to the Records Center indicating no conflict. If this is a new matter for a new client, please complete a New Client Form also.

SENT

I. GENERAL MATTER INFORMATION

Client Name: Randy Katz

Matter Name (limit 40 characters): Methods and Apparatus for Extended Game Play in a Lottery Environment

Matter Description (optional): _____

II. DETAILED MATTER INFORMATION

Nature of Matter: Patent/Trademark Prosecution

Please attach the Litigation Department Matter Classification List with the area(s) of law which best describe this matter circled. The data will be input into the Litigation Database once it is operational.

Amount Involved: \$ _____

If Foreign Involvement, List Countries: _____

III. REVENUE / BILLING INFORMATION

Proforma set to GUIDELINE - low rates Proforma set to STANDARD - high rates Client has special rate arrangement (attach copy)

Expected Revenues: _____

Will this matter be collected at GUIDELINE rate or greater? Yes No

If NO, do you have Vice Chair approval to open this matter? Yes No

If this is the first matter for a new client, do you expect this matter to generate more than \$100,000 in revenue? Yes No

If NO, do you have Vice Chair approval to open this matter? Yes No

Billing Address: _____

Contact Name: Randy Katz

Address: 615 Walden Drive

City: Beverly Hills

State: CA

Zip: 90210

Telephone: (310) 281-0120

Fax: (310) 281-0114

E-mail: rkatzla@aol.com

Billing Type: _____

Standard

Periodic - Regular (Hourly) 1000

Pro-Bono/Community Legal Svcs 9500
(Approved by CLS Committee)

Document Only Files 9799

Previously Approved Nonstandard
(check type of Nonstandard)

Nonstandard (Requires Department/Office Head Approval, if not previously approved for the client)

Periodic - Contingent 1100

Periodic - Cap (Limit) 1200

Periodic - Fixed Fee (Absolute) 1300

Periodic - Fixed Fee (Annual) 1310

Periodic - Fixed Fee with Incentive
Bonus 1320

Periodic - Fixed Fee - Top and
Bottom (Collar) 1330

Periodic - Discounted Rate 1400

Periodic - Blended Rate 1500

Transactional - Regular (Hourly) 2000

Transactional - Contingent 2100

Transactional - Cap (Limit) 2200

Transactional - Fixed Fee (Absolute) 2300

Transactional - Fixed Fee (Annual) 2310

Transactional - Fixed Fee with Incentive
Bonus 2320

Transactional - Fixed Fee - Top and Bottom
(Collar) 2330

Transactional - Discounted Rate 2400

Transactional - Blended Rate 2500

IR1:497538.1

05/01
Litigation

Other Requirements:

Assign task codes?

- No
- Yes, department standard list
- Yes, other standard list (indicate: _____)
- Yes, client custom list (attach copy)

Matter Invoice Format:

- Default (51 - formerly 52100)
- Other: _____ (attach description)
- Special Client Billing Arrangements? Yes (attach instructions)
- No

IV. ASSIGNMENT INFORMATION

Responsible Office (choose one):

- Los Angeles
- Irvine
- Newport Beach
- San Francisco
- Washington, D.C.
- Hong Kong
- Century City
- Menlo Park
- New York
- Tysons Corner
- London
- Shanghai
- Tokyo

Responsible Attorneys:

Partner in Charge: David B. Murphy Billing Partner: David B. Murphy Attorney to Receive Billing Memo: David B. Murphy

Assigned Timekeepers:

David B. Murphy Paul Veravanich Denise N. Doss
John C. Kappos Diane K. Wong Cinda B. Pacheco
Michael S. Davidson Valerie C. Murphy

Send Files To (choose one):

Attorney/Paralegal; Name: David B. Murphy
 Office: Irvine Location: _____ Extension: 2903
 or
 File Room: Los Angeles Century City Newport Beach/
 Irvine New York San Francisco/
 Menlo Park Washington, DC/
 Tysons Corner

V. REFERRAL INFORMATION

Name of Person Referring New Business: N/A
 Name of Firm/Company Referring New Business: N/A
 Referring Party's Business: N/A

VI. PARTNER AUTHORIZATIONS

Partner Requesting New Matter:

Partner Name: David B. Murphy Partner Signature: 
 Date: 12/5/02 Office: Irvine Department: IP&T

Initial here if Matter should not be included in the Weekly New Business Report:
 Initial here if a Web Page for matter, subject to appropriate security and confidentiality controls, should be created on firm Intranet:

Approval of Practice/Department/Office Head:

- Nonstandard Billing Type
- Confirmed all conflicts resolved/waivers in hand
- Release from pending status

Name: _____ Date: _____ Signature: _____

Approval of Community Legal Services Committee (for Pro Bono Matters):

Name: _____ Date: _____ Signature: _____