

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Brian C. Johnson, State Bar No. 235965 THE CHANLER GROUP 2560 Ninth Street, Parker Plaza, Suite 214 Berkeley, CA 94710 TELEPHONE NO: (510) 848-8880 FAX NO. (Optional): (510) 848-8118 E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Plaintiff, John Moore	FOR COURT USE ONLY  ENDORSED FILED ALAMEDA COUNTY  AUG 01 2012  CLERK OF THE SUPERIOR COURT By <u>DEBRA FURTADO</u> Deputy  CASE NUMBER: RG12634869
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Alameda STREET ADDRESS: 1225 Fallon Street MAILING ADDRESS: CITY AND ZIP CODE: Oakland, CA 94612 BRANCH NAME: Unlimited Civil	
PLAINTIFF/PETITIONER: John Moore DEFENDANT/RESPONDENT: Escalade, Incorporated, et al.	
<b>REQUEST FOR DISMISSAL</b> <input type="checkbox"/> Personal Injury, Property Damage, or Wrongful Death <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other <input type="checkbox"/> Family Law <input type="checkbox"/> Eminent Domain <input checked="" type="checkbox"/> Other (specify) : Health and Safety Code § 25249.6 et seq. (Prop 65)	
- A conformed copy will not be returned by the clerk unless a method of return is provided with the document. -	

1. TO THE CLERK: Please dismiss this action as follows:
- a. (1)  With prejudice (2)  Without prejudice
  - b. (1)  Complaint (2)  Petition
  - (3)  Cross-complaint filed by (name): \_\_\_\_\_ on (date): \_\_\_\_\_
  - (4)  Cross-complaint filed by (name): \_\_\_\_\_ on (date): \_\_\_\_\_
  - (5)  Entire action of all parties and all causes of action
  - (6)  Other (specify):\*

2. (Complete in all cases except family law cases.)

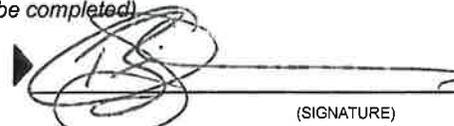
Court fees and costs were waived for a party in this case. (This information may be obtained from the clerk. If this box is checked, the declaration on the back of this form must be completed)

Date: July 25, 2012

Brian C. Johnson

(TYPE OR PRINT NAME OF  ATTORNEY  PARTY WITHOUT ATTORNEY)

\*If dismissal requested is of specified parties only of specified causes of action only, or of specified cross-complaints only, so state and identify the parties, causes of action, or cross-complaints to be dismissed.

  
 \_\_\_\_\_  
 (SIGNATURE)  
 Attorney or party without attorney for:  
 Plaintiff/Petitioner  Defendant/Respondent  
 Cross-Complainant

3. TO THE CLERK: Consent to the above dismissal is hereby given.\*\*

Date: \_\_\_\_\_

(TYPE OR PRINT NAME OF  ATTORNEY  PARTY WITHOUT ATTORNEY)

\*\* If a cross-complaint – or Response (Family Law) seeking affirmative relief – is on file, the attorney for cross-complainant (respondent) must sign this consent if required by Code of Civil Procedure section 581 (i) or (j).

  
 \_\_\_\_\_  
 (SIGNATURE)  
 Attorney or party without attorney for:  
 Plaintiff/Petitioner  Defendant/Respondent  
 Cross-Complainant

(To be completed by clerk)

- 4.  Dismissal entered as requested on (date): **AUG 01 2012**
- 5.  Dismissal entered on (date): \_\_\_\_\_ as to only (name): \_\_\_\_\_
- 6.  Dismissal not entered as requested for the following reasons (specify): **AUG 01 2012**
- 7. a.  Attorney or party without attorney notified on (date): \_\_\_\_\_
- b.  Attorney or party without attorney not notified. Filing party failed to provide  
 a copy to be conformed  means to return conformed copy

Date: **AUG 01 2012**

Clerk, by **DEBRA FURTADO**, Deputy

PLAINTIFF/PETITIONER: John Moore DEFENDANT/RESPONDENT: Escalade, Incorporated, et al.	CASE NUMBER: RG12634869
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**Declaration Concerning Waived Court Fees**

The court has a statutory lien for waived fees and costs on any recovery of \$10,000 or more in value by settlement, compromise, arbitration award, mediation settlement, or other recovery. The court's lien must be paid before the court will dismiss the case.

1. The court waived fees and costs in this action for *(name)*:
2. The person in item 1 *(check one)*:
  - a.  is not recovering anything of value by this action.
  - b.  is recovering less than \$10,000 in value by this action.
  - c.  is recovering \$10,000 or more in value by this action. *(If item 2c is checked, item 3 must be completed.)*
3.  All court fees and costs that were waived in this action have been paid to the court *(check one)*:  Yes  No

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
(TYPE OR PRINT NAME OF  ATTORNEY  PARTY MAKING DECLARATION)

\_\_\_\_\_  
(SIGNATURE)

1 **PROOF OF SERVICE**

2 I am employed in the County of Alameda, State of California. I am a citizen of the United  
3 States, over the age of 18 years, and not a party to the within action. My business address is 2560  
4 Ninth Street, Parker Plaza, Suite 214, Berkeley, California 94710-2565.

5 On July 26, 2012, I caused to be served the following document(s), described as,

6 **REQUEST FOR DISMISSAL**

7 on each interested party as follows:

8 Stephen L. Marsh, Esq.  
9 McKenna Long & Aldridge LLP  
10 600 West Broadway, Suite 2600  
11 San Diego, CA 92101  
12 *Attorneys for Escalade, Incorporated*

13 XXXXX (BY MAIL) I placed a true and correct copy of the foregoing document(s) in a  
14 sealed envelope addressed to each interested party as set forth above. I placed each such envelope,  
15 with postage thereon fully prepaid, for collection and mailing at The Chanler Group, located in  
16 Berkeley, California. I am readily familiar with The Chanler Group's practice for collection and  
17 processing of documents for mailing with the United States Postal Service. Under that practice, the  
18 documents are deposited with the United States Postal Service on the same day in the ordinary  
19 course of business.

20 Executed this 26th day of July, 2012, at Berkeley, California. I declare under the penalty of  
21 perjury under the laws of the State of California that the foregoing is true and correct.

22 

23 \_\_\_\_\_  
24 Allison Carr