

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, Peter Englander	FOR COURT USE ONLY ENDORSED FILED ALAMEDA COUNTY OCT 17 2012 CLERK OF THE SUPERIOR COURT By <u>Kmel Dhillon</u> Deputy
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Alameda STREET ADDRESS: 1221 Oak Street MAILING ADDRESS: CITY AND ZIP CODE: Oakland 94612 BRANCH NAME: Administration Building	
PLAINTIFF/PETITIONER: Peter Englander DEFENDANT/RESPONDENT: Lowe's Companies Inc., et al.	
REQUEST FOR DISMISSAL <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)	CASE NUMBER: RG12648949
- 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):
 - (4) Cross-complaint filed by (name):
 - (5) Entire action of all parties and all causes of action
 - (6) Other (specify):*

on (date):
on (date):

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

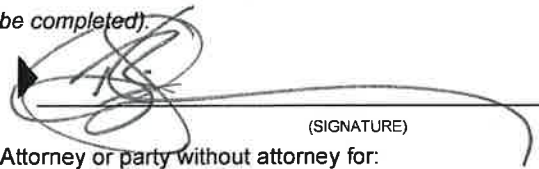
Court fees and costs were waived for a party in this case. (This information may be obtained from the clerk. If this box is checked, the declaration on the back of this form must be completed).

Date: October 10, 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): **OCT 17 2012**
- 5. Dismissal entered on (date): as to only (name):
- 6. Dismissal not entered as requested for the following reasons (specify):

- 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

Kmel Dhillon

Date: Clerk, by _____, Deputy

PLAINTIFF/PETITIONER: Peter Englander	CASE NUMBER:
DEFENDANT/RESPONDENT: Lowe's Companies Inc., et al.	RG12648949

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 eighteen (18) years, and not a party to the within action. My business
4 address is 2560 Ninth Street, Parker Plaza, Suite 214, Berkeley, CA 94710.

5 On October 16, 2012, I served the following document(s), described as:

6 **REQUEST FOR DISMISSAL**

7 on each interested party as follows:

8 Diana Biason, Esq.
9 Hunton & Williams LLP
10 555 South Hope Street, Suite 2000
11 Los Angeles, CA 90071
12 *Attorneys for Lowe's Companies Inc. and L G*
13 *Sourcing, Inc.*

14 Stuart I. Block, Esq.
15 Cox, Castle & Nicholson LLP
16 555 California Street, 10th Floor
17 San Francisco, CA 94104

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

25 Executed this 16th day of October, 2012, at Berkeley, California, I declare under the
26 penalty of perjury under the laws of the State of California that the foregoing is true and correct.

27 

28 Allison Carr