

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):
Josh Voorhees, State Bar No. 241436
The Chanler Group, 2560 9th Street, Suite 214, Berkeley, CA 94710
TELEPHONE NO.: 510-848-8880 FAX NO. (Optional): 510-848-8118
E-MAIL ADDRESS (Optional): josh@chanler.com
ATTORNEY FOR (Name): Plaintiff, Whitney R. Leeman, Ph.D.

FOR COURT USE ONLY

ELECTRONICALLY
FILED

Superior Court of California,
County of San Francisco
OCT 29 2014
Clerk of the Court
BY: VANESSA WU
Deputy Clerk

SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Francisco
STREET ADDRESS: 400 McAllister Street
MAILING ADDRESS: 400 McAllister Street
CITY AND ZIP CODE: San Francisco, 94102
BRANCH NAME: Unlimited Civil

PLAINTIFF/PETITIONER: Whitney R. Leeman, Ph.D.
DEFENDANT/RESPONDENT: Sethness Products Company

REQUEST FOR DISMISSAL CASE NUMBER: CGC-13-533954

A conformed copy will not be returned by the clerk unless a method of return is provided with the document.
This form may not be used for dismissal of a derivative action or a class action or of any party or cause of action in a class action. (Cal. Rules of Court, rules 3.760 and 3.770.)

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.)
The court did did not waive court fees and costs for a party in this case. (This information may be obtained from the clerk. If court fees and costs were waived, the declaration on the back of this form must be completed).
Date: October 29, 2014

Josh Voorhees
(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)

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

*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.

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

(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)

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

** 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).

(To be completed by clerk)

4. Dismissal entered as requested on (date):
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

Date:

Clerk, by _____ Deputy

PLAINTIFF/PETITIONER: Whitney R. Leeman, Ph.D. DEFENDANT/RESPONDENT: Sethness Products Company	CASE NUMBER: CGC-13-533954
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COURT'S RECOVERY OF WAIVED COURT FEES AND COSTS

If a party whose court fees and costs were initially waived has recovered or will recover \$10,000 or more in value by way of settlement, compromise, arbitration award, mediation settlement, or other means, the court has a statutory lien on that recovery. The court may refuse to dismiss the case until the lien is satisfied. (Gov. Code, § 68637.)

Declaration Concerning Waived Court Fees

1. The court waived court fees and costs in this action for (*name*):
2. The person named in item 1 is (*check one below*):
 - a. not recovering anything of value by this action.
 - b. recovering less than \$10,000 in value by this action.
 - c. 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 court 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)

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PROOF OF SERVICE

I am over 18 years of age and not a party to this action. I am employed in the county where the mailing took place. My business address is 2560 Ninth Street, Parker Plaza, Suite 214, Berkeley, California 94710-2565.

On October 29, 2014, I caused to be served the following document(s), described as:

REQUEST FOR DISMISSAL

on each interested party as follows:

Gary Roberts, Esq.
Dentons US LLP
601 South Figueroa Street, Suite 2500
Los Angeles, CA 90017-5704
Attorneys for Sethness Products Company

Sarah Ratcliffe Choi, Esq.
Dentons US LLP
525 Market Street, 26th Floor
San Francisco, CA 94105-2708
Attorneys for Sethness Products Company

XXXXX (BY ELECTRONIC MAIL) I caused a copy of each document(s) to be electronically served via File & ServeXpress on the recipients designated on the Service List located on the File & ServeXpress website.

Executed this 29th day of October 2014, at Berkeley, California, I declare under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.



Roz Conrad