A VINICAL SHARE WAS A STATE OF THE STATE OF	GIV-110
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar gumbor, and address); Troy C. Bailey, State Bar No. 277424	EN FOR COURT USE ONLY
THE CHANLER GROUP 2560 Ninth Street, Parker Plaza, Suite 214	
Berkeley, CA 94710 TELEPHONE NO: (510) 848-8880 FAX NO. (CORROBAD): (5	
E-MAIL ADDRESS (Optional): Troy (Ochanier com ATTORNEY-FOR (Name): Plaintiff, Anthony E. Held, Ph.D., 1	TOIR IN THE TANK
**************************************	Conid N. Varraco / G. Conig et de g. B. contre Coucit
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara STREET ADDRESS: 191 North First St.	County of San a Cong. Call land
MAILING ADDRESS:	Mar Cer
city and zip code: San Jose 95113 Branch name: Downtown Superior Court	C. Page
PLAINTIFF/PETITIONER: Anthony E. Held, Ph.D., P.E.	
DEFENDANT/RESPONDENT: Hosoda Bros. Inc., et al.	
REQUEST FOR DISMISSAL	CASE NUMBER:
Personal Injury, Property Damage, or Wrongful Death	114CV268193
Motor Vehicle Other	1140 V 200193
Family Law Eminent Domain	
Other (specify): Health and Safety Code § 25249	6 et seq. (Prop 65)
- A conformed copy will not be returned by the clerk un	
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):
V decisional design of the second design of the sec	• • •
(4) Cross-complaint filed by (name):	on (date):
(5) L Entire action of all parties and all causes of action	
(6) Other (specify):*	
2. (Complete in all cases-except family law cases.)	
	man Ithin information marche abbeta of house the state to the bar.
checked, the declaration on the back of this form mus	ase. (This information may be obtained from the clerk, If this box is
Date: May 5, 2016	to completely.
Troy C. Bailey	
(TYPE OR FRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)	(SIGNATURE)
"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.	Attorney or party without attorney for:
causes of action, or cross-complaints to be dismissed.	Plaintiff/Petitioner Defendant/Respondent
	L Cross-Complainant
3. TO THE CLERK: Consent to the above dismissal is hereby give	'en.**
Date:	à
(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)	(SIGNATURE)
** if a cross-complaint or Response (Family Law) seeking affirmative	Attorney or party without attorney for:
reitef – is on file, the attorney for cross-complainant (respondent) must sign this consent if required by Code of Civil Procedure section 581 (I)	Plaintiff/Petitioner Defendant/Respondent
of ()).	Cross-Complainant
(To be completed by clerk)	MAY O ADAD
4. Dismissal entered as requested on (date):	MAY - 9 2015
5 Dismissal entered on (date):	as to only (name);
6. Dismissal not entered as requested for the following n	easons (specify):
	144Y - 9 2010
7. a. Attorney or party without attorney notified on (date)	
b. Attorney or party without attorney not notified. Filing	party falled to provide
a copy to be conformed means to return	and the second of the second o
Date: 1/4Y - 9 2013 Clerk	, in the second
Form Adopted for Mandatory Use DEDUIEST FOR	Page 1 of 2  Figure Code of Chil Procedure, \$ 561 et seq.;

CB	×	.2	-

PLAINTIFF/PETITIONER: Anthony E. Held, Ph.D., P.E. CASE NUMBER: DEFENDANT/RESPONDENT: Hosoda Bros. Inc., et al. 114CV268193

## **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

	be paid before the court will dismiss the case.
1.	The court waived fees and costs in this action for (name):
	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.)  All court fees and costs that were waived in this action have been paid to the court (check one): Yes No  are under penalty of perjury under the laws of the State of California that the information above is true and correct.
	A second of the standard of the second of th
ite:	<u> </u>
te:	OR PRINT NAME OF ATTORNEY PARTY MAKING DECLARATION) (SIGNATURE)



## 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 May 5, 2016, I caused to be served the following document(s), described as

## REQUEST FOR DISMISSAL

on each interested party as follows:

Scott P. Nealey, Esq. Law Office Of Scott P. Nealey 71 Stevenson Street, Suite 400 San Francisco, CA 94015 Attorneys for Hosoda Bros., Inc.

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

Executed this 5<sup>th</sup> day of May, 2016, 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.

Rosalind Conrad