

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  
Josh Voorhees, State Bar No. 241436  
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): Josh@chanler.com  
ATTORNEY FOR (Name): Plaintiff Anthony E. Held, Ph.D., P.E.

FOR COURT USE ONLY  
ENDORSED  
FILED  
2016 JAN 11 P 2:21  
David H. Yamazaki, Clerk of the Superior Court  
County of Santa Clara, California  
Deputy Clerk

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara  
STREET ADDRESS: 191 N. First St.  
MAILING ADDRESS:  
CITY AND ZIP CODE: San Jose, 95113  
BRANCH NAME: Downtown Superior Court - Unlimited Civil

PLAINTIFF/PETITIONER: Anthony E. Held, Ph.D., P.E.  
DEFENDANT/RESPONDENT: Rofson Associates Inc., et al.

REQUEST FOR DISMISSAL  
 Personal Injury, Property Damage, or Wrongful Death  
 Motor Vehicle  Other  
 Family Law  Eminent Domain  
 Other (specify): Health and Safety Code § 25249.6 et seq. (Prop 65)

CASE NUMBER:  
115CV288243

- 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: January 6, 2016

Josh Voorhees  
(TYPE OR PRINT 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:  
 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)

(SIGNATURE)

\*\* 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).

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

(To be completed by clerk)

- 4.  Dismissal entered as requested on (date): JAN 11 2016  
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): JAN 11 2016  
b.  Attorney or party without attorney not notified. Filing party failed to provide  
 a copy to be conformed  means to return conformed copy

Date: JAN 11 2016 Clerk, by \_\_\_\_\_

C. Page Deputy  
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