



CASE NUMBER: CGC17559587

NOTICE OF SETTLEMENT (TRANSACTION ID # 61229574) FILED BY PLAINTIFF BRIASCO-STEWART, SAMANTHA

Document prepared for:

CASE NAME

SAMANTHA BRIASCO-STEWART VS. SEAN WILLIAM MCGINNIS

ET AL

DOCUMENT FILED DATE

Oct. 11th, 2017

CASE FILING DATE

June 16th, 2017

COUNTY

San francisco county, CA

JUDGE

CATEGORY

Teri L. Jackson

PERSONAL INJURY/PROPERTY DAMAGE - VEHICLE RELATED

Form Adopted for Mandatory Use NOTICE OF SETTLEMENT OF ENTIR Judicial Council of California CM-200 [Rev. January 1, 2007]	E CASE Call Rules of Court, rule 3,1385 www.courtinfo.ca.gov
(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)	(SIGNATURE) Page 1 of 2 Call Pulsa of Cault gala 3 1385
CRAIG A. KRONER, ESQ.	/
Date: 10-11-17	1////
I declare under penalty of perjury under the laws of the State of California that the fore	going is true and corract.
b. (1) Date: (2) Time: (3) Department:	
a. XI No trial date set	
4. Thal date:	
b. (1) Date: 11-15-17 (2) Time: 10: 30 AM (3) Department: 610	
Next scheduled hearing or conference: a. Purpose: CMC	
2. Date initial pleading filed: 6-16-17	
b. Conditional. The settlement agreement conditions dismissal of this management specified terms that are not to be performed within 45 days of the date be filed no later than (date):	of the settlement. A request for dismissal will
To the court, all parties, and any arbitrator or other court-connected ADR neutral 1. This entire case has been settled. The settlement is: a. Unconditional. A request for dismissal will be filed within 45 days after Date of settlement: 9-1-17	r the date of the settlement.
You must file a request for dismissal of the entire case within 45 days after the date unconditional. You must file a dismissal of the entire case within 45 days after the disconditional. Unless you file a dismissal within the required time or have shown go expired why the case should not be dismissed, the court will dismiss the entire case.	date specified in item 1b below if the settlement bood cause before the time for dismissal has
NOTICE TO PLAINTIFF OR OTHER PARTY SEE	EKING RELIEF
NOTICE OF SETTLEMENT OF ENTIRE CASE	CASE NUMBER: CGC17559587 JUDGE: DEPT. 610
DEFENDANT/RESPONDENT SEAN WILLIAM MCGINNIS, et al	
BRANCH NAME PLAINTIFF/PETITIONER: SAMANTHA BRIASCO-STEWART	
STREET ADDRESS 400 MCALLISTER STREET MAILING ADDRESS CITY AND ZIP CODE SAN FRANCISCO 94102	10/11/2017 Clerk of the Court BY:YOLANDA TABO-RAMII Deputy Clerk
ATTORNEY FOR (Name): PLAINTIFF(S) SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN FRANCISCO	Superior Court of California, County of San Francisco
E-MAIL ADDRESS (Optional) locak@sbcglobal.net	FILED
1141 RINGWOOD COURT # 10 SAN JOSE, CA. 95131-1757	ELECTRONICALLY
LAW OFFICE OF CRAIG A. KRONER	

CER Essential Forms

PLAINTIFF/PETITIONER: STEWART

CASE NUMBER. CGC17559587

DEFENDANT/RESPONDENT:MCGINNIS

PROOF OF SERVICE BY FIRST-CLASS MAIL NOTICE OF SETTLEMENT OF ENTIRE CASE

		NOTICE OF SE	: LL	C111110 - 7/177-	
the	notice	u cannot serve the Notice of Settlement of Ent must complete this proof of service.)			
Men .	nlasa	least 18 years old and not a party to this action and my residence or business address is (specify, RINGWOOD COURT # 10 SAN JO.	15		the county where the mailing took
2.	fully pi a. [2	ed a copy of the <i>Notice of Settlement of Entire Cas</i> repaid and <i>(check one)</i> : deposited the sealed envelope with the United	i States Postal	Service.	
	b. C	placed the sealed envelope for collection and with which I am readily familiar. On the same of deposited in the ordinary course of business was a sealed envelope for collection and with the sealed envelope for collection and with which I am readily familiar.	day correspond	ence is placed for ci	Mechan and manny, 433
	464	. The control of the	OR SERVE		
3.			ELECTRON	LCALLY	
		n (date): 10-11-17			
	b. fi	om (city and state): SAN JOSE			
4.	The envelope was addressed and mailed as follows: a. Name of person served: PETER J. HERSIG, ESQ.	c.	Name of person se	erved:	
		Street address: 639 KENTUCKY ST. IST FI	LR.	Street address:	
	(city: FAIRFIELD		City:	
		State and zip code: CA . 94533		State and zip code	9:
	b. 1	Name of person served:	d,	Name of person s	erved
	4	Street address:		Street address:	
		City:		City:	
		State and zip code:		State and zip cod	
	[X]	Names and addresses of additional persons serve	ed are attached	.(You may use form	POS-030(P).)
5.	Num	per of pages attached			
11	declare	under penalty of perjury under the laws of the Stat	te of California	that the foregoing is	true and correct
D	ate: 1	0-11-17			
C	RAIG	A KRONER, ESO. (TYPE OR PRINT NAME OF DEGLARANT)	A Ada was to the state of the s	1/	(SIGNATURE OF DECLARANT)