

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  
 Lina M. Michael, Esq. SBN: 237842; Brian P. McGurk, Esq. SBN: 250091  
**MICHAEL & ASSOCIATES, PC**  
 555 St Charles Drive, Suite 204, Thousand Oaks, CA 91360  
 TELEPHONE NO.: (805) 379-8505 FAX NO. (Optional): (805) 379-8525

FOR COURT USE ONLY

E-MAIL ADDRESS (Optional):

ATTORNEY FOR (Name): American Express Centurion Bank, a Utah state chartered bank, Plaintiff

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN FRANCISCO**

STREET ADDRESS: 400 Mcallister Street

MAILING ADDRESS:

CITY AND ZIP CODE: San Francisco 94102

BRANCH NAME:

PLAINTIFF/PETITIONER: American Express Centurion Bank

DEFENDANT/RESPONDENT: Ross Piccinini, aka Ross D Piccinini an individual

**REQUEST FOR DISMISSAL****ELECTRONICALLY FILED****Superior Court of California,  
County of San Francisco****07/22/2015  
Clerk of the Court**

BY:DAVID YUEN

Deputy Clerk

CASE NUMBER: CGC-15-543470

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):
- (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.)

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: July 21, 2015

Lina M. Michael SBN #237842

(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:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Plaintiff/Petitioner | <input type="checkbox"/> Defendant/Respondent |
| <input type="checkbox"/> 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:

- |   |   |
|---|---|
| <input type="checkbox"/> Plaintiff/Petitioner | <input type="checkbox"/> Defendant/Respondent |
| <input type="checkbox"/> Cross-Complainant    |   |

(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: American Express Centurion Bank	CASE NUMBER:
DEFENDANT/RESPONDENT: Ross Piccinini, aka Ross D Piccinini an individual	CGC-15-543470

**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**

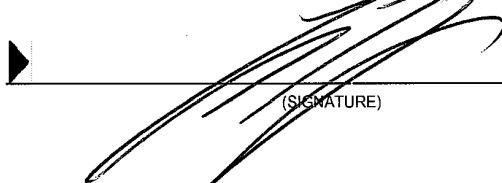
1. The court waived court fees and costs in this action for (*name*):
2. The person named in item 1 is (*check one below*):
  - a.  not recovering anything of value by this action.
  - b.  recovering less than \$10,000 in value by this action.
  - c.  recovering \$10,000 or more in value by this action. (*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: July 21, 2015

Lina M. Michael SBN #237842

(TYPE OR PRINT NAME OF  ATTORNEY  PARTY MAKING DECLARATION)



(SIGNATURE)

## PROOF OF SERVICE

I, the undersigned, declare:

I am a citizen of the United States of America, am over the age of eighteen (18) years, and not a party to the within action. I am an employee of Michael & Associates, PC, and my business address is 555 St. Charles Drive, Suite 204, Thousand Oaks, California 91360.

On July 21, 2015, I caused to be served the following documents:

*Request for Dismissal*

On the party involved and address as follows:

ROSS PICCININI  
126 ALHAMBRA ST  
SAN FRANCISCO, CA 94123

BY PERSONAL DELIVERY: I caused such envelope to be delivered by hand to the offices of each addressee above.

X BY MAIL: I served the above-listed documents by enclosing them in an envelope and placing the envelope for collection and mailing following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in Thousand Oaks, California, in a sealed envelope with postage fully prepaid. I understand that service shall be presumed invalid upon motion of a party served if the postal cancellation date or postage meter date on the envelope is more than one day after the date of deposit for mailing contained on this declaration.

BY FACSIMILE: By use of facsimile machine telephone number 805-379-8525, I served a copy of the within document on the above interested parties at the facsimile number(s) listed above on this date before 5:00 p.m.

BY FEDERAL EXPRESS OVERNIGHT DELIVERY: I am "readily familiar" with the firm's practice of collection and processing correspondence for Federal Express. Under that practice, it would be picked up by a representative on that same day, in the ordinary course of business and would be delivered the next business day.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

EXECUTED: July 21, 2015, at Thousand Oaks, California.

  
BEATRIZ MARTINEZ