

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) Joseph S. May 245924 Law Office of Joseph S. May 1388 Sutter Street, Suite 810, San Francisco, CA 94109 TELEPHONE NO.: (415) 781-3333 FAX NO. (Optional): (415) 707-6600 E-MAIL ADDRESS (Optional): joseph@josephmaylaw.com ATTORNEY FOR (Name): Plaintiff Aaron Abel	FOR COURT USE ONLY ELECTRONICALLY FILED <i>Superior Court of California, County of San Francisco</i> 08/17/2015 Clerk of the Court BY: KIMBERLY CLAUSSEN Deputy Clerk
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Francisco STREET ADDRESS: 400 McAllister Street MAILING ADDRESS: CITY AND ZIP CODE: San Francisco, CA 94102 BRANCH NAME: Civic Center Courthouse	
PLAINTIFF/PETITIONER: Aaron Abel DEFENDANT/RESPONDENT: 1979 Union Street Corp.	
REQUEST FOR DISMISSAL	CASE NUMBER: CGC-15-543471
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):* Only as to Defendants listed in Attachment 1; NOT as to 1979 Union Street Corporation

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: August 17, 2015

Joseph S. May
 (TYPE OR PRINT NAME OF ☒ ATTORNEY ☐ PARTY WITHOUT ATTORNEY)

(SIGNATURE)

*If dismissal requested is of specified parties only or 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): _____
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

DISMISSAL ENTERED

Date:

Clerk, by _____, Deputy

PLAINTIFF/PETITIONER: Aaron Abel
 DEFENDANT/RESPONDENT: 1979 Union Street Corp.

CASE NUMBER:
 CGC-15-543471

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)

SHORT TITLE: Abel v. 1979 Union Street Corp.	CASE NUMBER: CGC-15-543471
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ATTACHMENT (Number): 1*(This Attachment may be used with any Judicial Council form.)*

Plaintiff requests dismissal of the following Defendants only:

1. Ho Bet Lee, Lai Fong Lee, and Leo Ming Lee, as co-trustees of the generation-skipping trust established under the Hom Hon Ping and Kai Tai Lee Revocable Trust U/A dated December 2, 1976, as amended May 10, 1989;
2. May Lee;
3. Leo M. Lee;
4. Leo Y. Lee.

The parties are to bear their own costs and attorneys' fees.

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page 3 of 3*(Add pages as required)*

Aaron Abel v. 1979 Union Street Corp.
San Francisco Superior Court
Case No. CGC-15-543471

PROOF OF SERVICE

I, Joseph S. May, certify:

I am, and at all times mentioned herein was, an active member of the State Bar of California and not a party to the above-entitled cause. My business address is 1388 Sutter Street, Suite 810, San Francisco, California.

I served the attached **REQUEST FOR DISMISSAL** on August 17, 2015, by causing a copy thereof to be electronically served through File and Serve Express, on the following:

Mark R. Mittelman, Esq.
Law Offices of Mark R. Mittelman
575 Lennon Lane, Suite 150
Walnut Creek, CA 94598
*Attorneys for Defendants 1979 Union Street
Corporation; May Lee*

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

DATED: August 17, 2015


JOSEPH S. MAY