

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):

Alan R. Brayton, Esq (Bar #73685)

Brayton &lt; Purcell

222 Rush Landing Road, Novato, CA 94948

TELEPHONE NO.: (415) 898-1555

FAX NO. (Optional):

E-MAIL ADDRESS (Optional):

ATTORNEY FOR (Name): Plaintiff, YSIDRO LIMON, SR.

FOR COURT USE ONLY

**ELECTRONICALLY  
FILED**Superior Court of California,  
County of San Francisco**12/08/2016**

Clerk of the Court

BY: SANDRA SCHIRO

Deputy Clerk

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: YSIDRO LIMON, SR.

DEFENDANT/RESPONDENT: AMCORD, INC., et al.

REQUEST FOR DISMISSAL

CASE NUMBER: CGC-15-276378

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 prejudiceb. (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):\* As to defendant GRINNELL LLC only. Each party to bear its own costs.

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: SEPTEMBER 29, 2016

Alan R. Brayton

(TYPE OR PRINT NAME OF ☒ ATTORNEY ☐ PARTY WITHOUT ATTORNEY)  
(SIGNATURE)

for Alan R. Brayton

\*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.

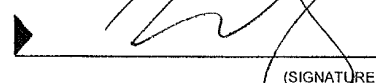
Attorney or party without attorney for:

☒ Plaintiff/Petitioner☐ Defendant/Respondent☐ Cross-Complainant

3. TO THE CLERK: Consent to the above dismissal is hereby given.\*\*

Date: 12/7/16

MICHAEL Q. EAGAN, JR.

(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

GRINNELL LLC

(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):**DISMISSAL ENTERED**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: YSIDRO LIMON, SR.  
 DEFENDANT/RESPONDENT: AMCORD, INC., et al.

CASE NUMBER:  
 CGC-15-276378

### 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)

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**PROOF OF SERVICE**

*Ysidro Limon, Sr. v. Amcord, Inc. et al.*  
San Francisco Superior Court No. CGC15-276378

I am a resident of the State of California and over the age of eighteen years, and not a party to the within action; my business address is One Market, Spear Street Tower, San Francisco, CA 94105-1126. On December 8, 2016, I served the within document:

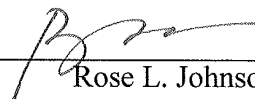
**REQUEST FOR DISMISSAL**

(as to Defendant GRINNELL LLC only)



**BY ELECTRONIC SERVICE VIA FILE & SERVE XPRESS:** I attached a true and correct copy of the above-entitled document(s) to File & ServeXpress by electronic transfer for service on all counsel of record by electronic service pursuant to the Complex Asbestos Litigation Case Management Order. This service complies with C.C.P. § 1010.6. The file transmission was reported as complete and a copy of the File & ServeXpress Filing Receipt page will be maintained with the document(s) in our office.

I declare under penalty of perjury that I am employed in the office of a member of the bar of this court at whose direction the service was made, and that the foregoing is true and correct. Executed on December 8, 2016, at San Francisco, California.

  
\_\_\_\_\_  
Rose L. Johnson