

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Kari Krogseng, SBN 215263, for the Attorney General of California, Kamala D. Harris, 1300 I Street, Suite 125, PO Box 944255, Sacramento, CA, 94244-2550 TELEPHONE NO.: 916.322.1067 FAX NO. (Optional): 916.324.8835 E-MAIL ADDRESS (Optional): Kari.Krogseng@doj.ca.gov ATTORNEY FOR (Name): California Department of Justice - Bureau of Firearms	FOR COURT USE ONLY <div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%;"> <div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;"> FILED ENDORSED </div> <div style="margin-top: 10px;"> JAN 13 2014 </div> <div style="margin-top: 10px;"> By <u>M. GARCIA</u> Deputy Clerk </div> </div>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Sacramento STREET ADDRESS: 720 Ninth Street MAILING ADDRESS: CITY AND ZIP CODE: Sacramento, CA 95814-1380 BRANCH NAME:	
PLAINTIFF/PETITIONER: California Department of Justice-Bureau of Firearms DEFENDANT/RESPONDENT: Office of Administrative Law	
REQUEST FOR DISMISSAL	CASE NUMBER: 34-2012-80001279
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: January 3, 2014

Kari Krogseng, Deputy Attorney General
 (TYPE OR PRINT NAME OF ☒ ATTORNEY ☐ PARTY WITHOUT ATTORNEY)

*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: January 3, 2014

Kari Krogseng, Deputy Attorney General
 (TYPE OR PRINT NAME OF ☒ ATTORNEY ☐ PARTY WITHOUT ATTORNEY)

** 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 13 2014

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 13 2014
 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 13 2014

Clerk, by [Signature], Deputy

DECLARATION OF SERVICE BY U.S. MAIL

Case Name: **Department of Justice v. Office of Administrative Law**

No.: **34-2012-80001279**

I declare:

I am employed in the Office of the Attorney General, which is the office of a member of the California State Bar, at which member's direction this service is made. I am 18 years of age or older and not a party to this matter; my business address is 1300 I Street, Suite 125, P.O. Box 944255, Sacramento, CA 94244-2550.

On January 3, 2014, I served the attached **Request for Dismissal** by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid, in the United States Mail at Sacramento, California, addressed as follows:

Elizabeth Heidig
Office of Administrative Law
Office of the Chief Counsel
300 Capitol Mall, Suite 1250
Sacramento, CA 95814 C-19

Attorney for Office of Administrative Law

Jason A. Davis
The Law Offices of Davis & Associates
41593 Winchester Road, Suite 200
Temecula, CA 92590

*Attorney for California Business
Environments, Inc., dba Franklin Armory*

I declare under penalty of perjury under the laws of the State of California the foregoing is true and correct and that this declaration was executed on January 3, 2014, at Sacramento, California.

Tursun Bier
Declarant

Tursun Bier
Signature

RECEIVED
IN DROP BOX

14 JAN -3 PM 3:20

CRIME COURT DUFF
SUPERIOR COURT OF CALIFORNIA
COUNTY OF SACRAMENTO