

Honorable Judge Catherine Shaffer
Noted for Hearing: May 25, 2012
Without Oral Argument

IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF KING

Dr. DAVID KERBS, individually and on behalf
of the class of similarly situated persons and
entities,

Plaintiffs,

vs.

SAFECO INSURANCE COMPANY OF
ILLINOIS, INC. and SAFECO OF AMERICA
INSURANCE COMPANY (a/k/a "SAFECO
AUTO" and/or "SAFECO OF AMERICA"),
foreign insurance companies,

Defendants.

Case No.: 10-2-17373-1 SEA

**PLAINTIFF'S MOTION FOR
PRELIMINARY APPROVAL OF
CLASS -WIDE SETTLEMENT**

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1 Plaintiff David Kerbs moves the Court for an Order that provides the following relief:

2 1. Grants Preliminary Approval of the Class Settlement agreed to by the parties;

3 2. Permits Diane Osborne to intervene in the action as a Plaintiff-Intervenor;

4 3. Certifies a settlement class consisting of a Policyholder subclass, a

5 Claimant/Patient subclass and a Provider subclass with regard to Washington provider bills that
6 were reduced by Defendants during the class period based on UCR85 reductions;

7 4. Appoints David Breskin and Breskin Johnson & Townsend as Settlement Class
8 Counsel and Ms. Osborne and Dr. Kerbs as representatives of the settlement subclasses;

9 5. Directs that Notice be sent to the Class in the form proposed by the parties
10 pursuant to their settlement agreement and attached as **Attachment A** to the proposed order;

11 6. Sets dates for class members to exercise their right to exclude themselves from
12 the settlement class and/or to object to the settlement; and

13 7. Approves the claim form to be submitted by class members to be paid pursuant
14 to the terms of settlement in the form proposed by the parties pursuant to their settlement
15 agreement and attached as **Attachment B** to the proposed order.¹

16 I. FACTS

17 A. Summary of the Case

18 Because of the extensive motions practice in the case, the Court is very familiar with the
19 facts of the case and claims. So a brief summary of the case is provided. This action was filed
20 by Plaintiff, Dr. David Kerbs, in May 2010 against Defendants Safeco Insurance Company of
21 Illinois and Safeco Insurance Company of America (“Safeco”). In the lawsuit, he alleges that
22 Safeco failed to pay its insured’s reasonable medical expenses under the insured’s Personal
23 Injury Protection (“PIP”) policy as required by RCW 48.22.005. It did so by improperly
24 reducing Washington health care provider bills submitted under the PIP policy using UCR 85
25
26

¹ The Defendant Safeco Insurance Companies will be filing their own pleading in support of preliminary approval.

1 reductions. A “UCR 85 reduction” is a reduction that is based on an amount that represents the
2 85th percentile of Ingenix MDR database charges in the provider’s geographic area.

3 Plaintiff brought this lawsuit on his behalf and on behalf of a class of similarly situated
4 Washington providers whose bills were reduced by Safeco using UCR85 reductions. He
5 alleged that Safeco’s practices were unfair and deceptive under the Washington Consumer
6 Protection Act (“CPA”) and breached a common law contract with providers. He also alleged a
7 Declaratory Judgment Act claim that Safeco’s practices violated RCW 48.22.005 and WAC
8 regulations relating to fair claims handling practices and a claim for unjust enrichment.

9 In July 2010, Safeco Answered the Complaint denying the Plaintiff’s claims and
10 alleging various affirmative defenses. In September 2010, Plaintiff took initial discovery from
11 Safeco in the form of interrogatories, requests for production and the deposition of a Safeco
12 claims adjuster and two CR 30(b)(6) representatives. Plaintiff then moved for class
13 certification. Safeco moved to continue the hearing on the class certification motion and moved
14 for summary judgment. The parties entered a stipulated briefing schedule on the motions. In
15 November 2010, the Court granted in part and denied in part Safeco’s summary judgment
16 motion and dismissed Plaintiff’s breach of contract and unjust enrichment claims.

17 In December 2010, Plaintiff filed a motion to amend the Complaint to correct the name
18 of one of the Defendant companies and to extend the time period applicable to the class claims
19 from May 2008 to May 2006. The Court granted the motion and in January 2011, Safeco
20 moved to dismiss the Amended Complaint. On January 14, 2011, the Court denied the motion
21 and in February 2011, Safeco filed a notice of motion for discretionary review of the order and
22 moved this Court for certification of the issues in its January 14 for immediate review. The
23 Court denied Safeco’s motion, but subsequently granted Safeco’s motion to continue the
24 hearing on Plaintiff’s motion for class certification and for partial summary judgment.

25 In the meantime, the parties engaged in extensive discovery. Plaintiff took additional
26 fact witness depositions, propounded interrogatories and document requests. Plaintiff also

1 moved to compel discovery and for a protective order setting a reasonable fee for health care
2 providers when responding to Safeco's discovery requests. Safeco propounded interrogatories
3 and document requests on Dr. Kerbs. It deposed Dr. Kerbs twice and Dr. Kerbs responded to
4 multiple sets of interrogatories and document production requests.

5 In March 2011, Safeco moved a second time to dismiss the Amended Complaint.
6 Plaintiff moved to strike the motion. On March 23, the Court of Appeals Commissioner denied
7 Safeco's motion for discretionary review of the Court's January 14 order denying its motion to
8 dismiss. On April 1, this Court granted Plaintiff's motion to strike Safeco's second motion to
9 dismiss. On April 21, Safeco moved for discretionary review of the Court's April 1 order.

10 On April 4, the Court granted in part and denied in part Plaintiff's motion for class
11 certification. It certified the unfair practice CPA claims for trial on behalf of a class of
12 Washington providers whose bills were reduced using UCR 85 reductions from May 13, 2006
13 to March 31, 2011. A two-phase trial plan was adopted: the first phase would adjudicate the
14 liability issues and the second phase damages. The Court appointed Dr. Kerbs as Class
15 Representative and David E. Breskin of Breskin Johnson & Townsend as Class Counsel. A trial
16 date of October 24, 2011 was set for the liability phase of the trial.

17 On April 15, Safeco moved for a stay and on April 18, it moved to certify the April 4
18 order for review. On May 2, the Court denied the motions. Safeco then moved for discretionary
19 review of the order. On July 26, the Court of Appeals Commissioner denied review.

20 On August 9, Plaintiff moved for approval of a form of notice to be sent to the Class
21 informing them of the pendency of the action. On August 25, before the Court ruled on
22 Plaintiff's motion, Safeco moved to modify the Commissioner's ruling denying review of the
23 certification order and this Court continued its consideration of Plaintiff's motion for approval
24 of the form of class notice pending the appellate court's ruling on Safeco's motion to modify.
25 Safeco's motion to modify is still pending before the Washington Court of Appeals.
26

1 In the meantime, on May 6, 2011, Plaintiff moved for a partial summary judgment of
2 liability on his unfair CPA practice claims. He also asked for a determination that class
3 members were third party beneficiaries under the PIP policy or had received equitable
4 assignments of the insured's PIP benefits when submitting their bills to Safeco to be paid.

5 On June 3, the Court denied Plaintiff's motion but granted his request that class
6 members were third-party beneficiaries when submitting their bills to Safeco to be paid under
7 the PIP policy. The Court also granted Dr. Kerbs request that he received an equitable
8 assignment of the insured's rights under the PIP policy. It denied without prejudice the request
9 of other class members for a similar determination pending submission of evidence of the
10 insured's intent or expectation that PIP benefits would be assigned to providers when
11 submitting their bills to Safeco to be paid. Safeco moved for reconsideration of these
12 determinations. On June 22, 2011, the Court denied the motion.

13 In May 2011 and again in July 2011, the parties served witness disclosures and
14 additional discovery ensued until early September 2011. Plaintiff propounded interrogatories
15 and document requests and took additional fact and expert witness depositions. Safeco served
16 34 discovery subpoenas on health care providers, took the deposition of one of the provider
17 witnesses and took the deposition of Plaintiff's expert, Dr. Foreman. Safeco also filed motions
18 to exclude witnesses and compel discovery that were denied by the Court. Plaintiff arranged
19 for Safeco's deposition of seven additional witnesses. Plaintiff also subpoenaed various
20 insurance companies for deposition, including American Family Insurance, which moved to
21 quash the subpoena. The Court denied the motion and two auto insurers were deposed.

22 On August 17, Plaintiff moved to continue the October 24 trial date to November 28 to
23 permit notice to be sent to the class and give class members the opportunity to opt-out of class
24 before trial. The Court granted Plaintiff's motion and re-set the trial for November 28 and
25 subsequently denied Safeco's motion to continue the trial further. Plaintiff also moved for
26 revision of the Court's June 3 order denying equitable assignments to class members and

1 submitted new evidence in support of the motion. The motion was noted for September 9, but
2 was continued to the first day of trial and is still pending before this Court.

3 On September 23, 2011, Plaintiff served on Defendants an ER 408 offer of settlement in
4 connection with the parties, upcoming, October 21 mediation with JAMS mediator, Thomas
5 Harris. On October 3, Safeco removed the case to federal court asserting that Plaintiff's
6 September 23 settlement offer disclosed an amount in controversy of more than \$5 million and
7 federal court jurisdiction under the Class Action Fairness Act ("CAFA").

8 On October 6, Plaintiff moved for remand of the case to this Court and for sanctions.
9 On October 7, Safeco moved the federal court to dismiss the case under the federal court's
10 pleading standard. The federal court stayed the motion to dismiss pending resolution of
11 Plaintiff's motion for remand and extensive briefing on the motion for remand ensued. In the
12 meantime, the Washington Court of Appeals stayed further proceedings on Safeco's motion to
13 modify the Commissioner's denial of Safeco's motion for discretionary review of the class
14 certification order pending a determination by the federal court of its jurisdiction over the case.

15 On October 21, the parties mediated all day with mediator Harris, but could not reach a
16 settlement. On December 1, 2011 the federal court granted Plaintiff's motion for remand and
17 sanctions. On December 9, Plaintiff filed his motion for an award of fees pursuant to the court's
18 December 1 order. On December 12, Safeco filed a petition with the Ninth Circuit requesting
19 an expedited review under CAFA of the December 1 remand order and a stay of proceedings.

20 On January 11, 2012, the District Court awarded Plaintiff fees on his motion. On
21 February 9, Safeco filed an appeal of the court's order. On February 28, the Ninth Circuit
22 denied Safeco's motion for permission to appeal the remand order. On March 1, Safeco filed a
23 motion for en banc review of the order denying it permission to appeal under CAFA. On April
24 30, 2012, the Ninth Circuit denied en banc review of the remand order.

25 In the meantime, Plaintiff moved to continue the trial date because of the delay caused
26 by removal to the federal court and the trial date was reset for June 18, 2012. Also, the Ninth

1 Circuit directed the parties to participate in mediation with Ninth Circuit mediator, Chris Goelz.
2 Extensive settlement discussions then ensued with Mr. Goelz and at his urging between Class
3 Counsel and Safeco's counsel. As a result, the parties reached a settlement on April 25 and
4 agreed to a form of notice to be sent to the Class and the claim form to be used by members to
5 obtain the benefits provided under the agreement. A written agreement was entered into by the
6 parties thereafter. *See, Ex. 1* to Declaration of David Breskin ("Breskin Decl."). The settlement
7 is subject to approval by this Court under CR 23(e) and will terminate all other proceedings.

8 **B. The Terms of Settlement**

9 The settlement of the case will involve three subclasses to ensure that full relief is
10 provided: (1) a subclass of policyholders; (2) a subclass of claimants (patients that are not
11 policyholders) and (3) Washington health care providers. The parties are requesting that the
12 Court certify a settlement class consisting of these three subclasses as part of its order granting
13 preliminary approval of the settlement. The policyholder and patient/claimant subclasses are
14 necessary to ensure full relief because it is possible that either the policyholder or the patient
15 paid the provider for the UCR85 reductions taken by Safeco and would be entitled to recoup
16 the payment they made through the claims process established by the settlement agreement.

17 In exchange for a release of claims and dismissal of the action, Safeco will provide the
18 following non-monetary and monetary benefits to the subclasses:

- 19 1. It will implement and continue for five years use of the new "FAIR Health
20 database instead of the Ingenix MDR database that was the subject matter of the lawsuit.
- 21 2. It will publicize its practices through its website.
- 22 3. It will inform policy holders of its practices before initial purchase and renewal.
- 23 4. It will inform providers of its practices who contact Safeco about coverage.
- 24 5. Upon submission of the agreed upon claim form, it will pay 80% of the amount
25 of UCR 85 reductions taken to either the provider or to the policy holder or claimant (to the
26 extent they paid the provider) up to a total amount of \$1.9 million.

1 and does not suffer from the conflict of interest that existed with the Ingenix MDR database.²
2 Second, Safeco has agreed to provide new disclosures of its practices. Other settlements in
3 similar cases have not provided non-monetary relief. For example, in *Coffell v. Allstate Ins.*
4 *Co.*, Judge Downing approved settlement of similar claims arising from Allstate's practice of
5 reducing PIP claims down to the 85th percentile of the Ingenix MDR database. The *Allstate*
6 settlement did not provide non-monetary relief.³

7 Safeco has also agreed to monetary benefits provided to class members that are more
8 generous than benefits provided to similar claimants in other class actions involving similar
9 claims. For example, in the *Allstate* case, Judge Downing approved a settlement that permitted
10 Washington health care providers to recover 70% of the reductions made, whereas the
11 settlement in this case permits recovery of 80% of the reductions. *See*, Breskin Decl. Ex. 2 at 7.

12 *Pickett, supra.* at 188-189, states the criteria for approving a class settlement, stating:

13 The criteria generally utilized to make this determination include: the likelihood of
14 success by plaintiffs; the amount of discovery or evidence; the settlement terms and
15 conditions; recommendation and experience of counsel; future expense and likely
16 duration of litigation; recommendation of neutral parties, if any; number of objectors
17 and nature of objections; and the presence of good faith and the absence of collusion. 2
HERBERT B. NEWBERG & ALBA CONTE, NEWBERG ON CLASS ACTIONS §
11.43 "General Criteria for Settlement Approval" (3d ed. 1992).

17 These criteria show that preliminary approval should be granted. First, even though at
18 the point of settlement Plaintiff had a substantial likelihood of success on the merits, Safeco's
19 persistent appeals and motions practice would render future litigation very expensive and the
20 likely duration of the case indefinite. Because the loss experienced by individual providers is
21 likely to be small, extensive delay before judgment was entered would significantly diminish
22 the value of their claim. Accordingly, the likely duration of the litigation before final judgment
23 could be entered is a significant factor weighing in favor of settlement. Breskin Decl. at ¶ 5.

24
25 ² *See, e.g., McCoy v. Health Net, Inc.*, 569 F.Supp.2d 448, 464 (D.N.J. 2008) discussing value to nationwide class
26 action settlement of change from reliance on Ingenix database.

³ *See*, Mot. for Approval of Settlement, Breskin Decl. Ex. 2. Similar class action settlements approved by this court
against MetLife Ins. Co. and USAA also did not include non-monetary relief of the type here. Breskin Decl. ¶ 3.

1 Second, the case was settled only after it was intensely litigated for almost two years.
2 The parties had engaged in extensive discovery through interrogatories, document requests and
3 deposition of fact and expert witnesses. There was significant, if not unprecedented, motions
4 practice. These facts also weigh in favor of preliminary approval, because they indicate that the
5 parties and their counsel were fully informed of the facts and could appropriately weigh the
6 risks and benefits of continued litigation. Breskin decl. at ¶6. Finally, Class counsel, who has
7 represented class members in similar cases, recommends the settlement in light of the above
8 considerations and the fact that the prior settlements in similar cases, like the *Allstate, Metlife*
9 and *USAA* cases, produced less favorable settlements for class members. Breskin decl. at ¶ 5.

10 Subject to Court approval, the settlement calls for payment of a class representative fee
11 of \$17,500 and attorney fees and costs of \$900,000. Class representative fees between \$15,000
12 and \$20,000 have been routinely approved by federal courts, where as here, the class
13 representative has engaged in extensive discovery and participated in motions practice by filing
14 declarations.⁴ A class representative fee of less than \$2,000 is regarded as reasonable where
15 the class member has not engaged in extensive discovery or motions practice. Here Dr. Kerbs
16 was deposed twice, answered multiple sets of written discovery and filed declarations in
17 support of and/or in opposition to motions filed in the case. Breskin Decl. at ¶7.

18 The lodestar method is used to calculate a reasonable attorney fee under the CPA.⁵ The
19 lodestar fee is calculated by multiplying the reasonable number of hours expended by the
20 attorney's reasonable hourly rate. *Id.* The fee may be adjusted upward or downward based on
21 the risk inherent in taking the case and/or the quality of the services provided. *Id.* In our case,
22 Class Counsel incurred around \$30,300 in costs and \$665,000 in fees calculated by using an
23 hourly rate of \$495 per hour. *See*, Breskin Decl. at ¶8 and records attached as **Exhibit 3**. These
24 fees and costs are reasonable in connection with the CPA claims and certification of those
25 claims. Breskin Decl. at ¶9. The proposed hourly rate for Class Counsel is reasonable because

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⁴ *See, Garner v. State Farm Mut. Auto Ins. Co.*, 2010 U.S. Dist. LEXIS 49477 (N.D. Cal.2010) at fn.8.

⁵ *See, Bowers v. TransAmerican Ins. Co.*, 100 Wn.2d 581, 595, 598-601 (1983).

1 of prior fee awards and reasonable increases since those fee awards were made.⁶ Counsel
2 anticipates expending an additional \$15,000 in fees in order to complete the notice and final
3 approval process and to ensure class members receive the benefits of the settlement after a final
4 judgment is entered. Breskin Decl. at ¶11. Accordingly, at time of final approval, Class
5 Counsel's reasonable lodestar fee will be around \$685,000.

6 A significant reason for the large expenditure of fees was Safeco's unprecedented
7 motions practice in this Court, the Court of Appeals, the Federal District Court and the Ninth
8 Circuit. The Court is very aware of this motions practice. The amount of fees incurred is also
9 the product of the extensive discovery undertaken and responded to. Breskin Decl. at ¶9.

10 Plaintiff's other counsel, Mr. Houck and Mr. Kornfeld, report incurring a total of
11 around \$13,000 in costs and around \$270,000 in fees, calculated using the same hourly rate of
12 \$495 per hour. The total costs for all counsel are then \$43,300 and the lodestar fee is \$950,000.
13 As costs incurred must be reimbursed or paid, the lodestar fee amount requested is no more
14 than \$856,700 and is therefore \$94,300 below the actual lodestar fee incurred of \$950,000.⁷

15 In the *Allstate* case, Judge Downing approved a fee award in 2007 of \$630,000 in a case
16 that did not involve the same extensive motions practice or discovery. Breskin Decl. at ¶12.
17 The fee requested in this case of \$856,700 is reasonable in comparison and should be granted
18 preliminary approval subject to notice to the class members and any objection by them.

19 **B. Permissive Intervention of Ms. Osborne to Effectuate Full Relief**

20 Diane Osborne should be allowed to intervene as a Plaintiff and representative of the
21 policyholder and claimant subclasses, so that full relief is afforded. She is an appropriate
22
23

24 ⁶ For example, in 2010, almost two years ago, this Court granted counsel an award of reasonable fees incurred on a
25 discovery motion in which the fees were calculated using an hourly rate of \$450 per hour. The \$495 rate used
today represents only about a 4.5% increase per year over the past two years. Breskin Decl. at ¶10.

26 ⁷ A 50% multiplier for Class Counsel's fees would also be proper because of the risks inherent in the case when it
was brought and the fact that Counsel's fee was a contingency fee. *See, Bowers*, 100 Wn.2d at 598-601 (1983).
But a multiplier is unnecessary because the lodestar amount already exceeds the fee award requested by \$90,500.

1 representative because Dr. Kerbs treated her and her bills were reduced using UCR 85
2 reductions. She is knowledgeable of the practices and the issues involved. Breskin Decl. at ¶13.

3 CR 24(b)(2) allows for permissive intervention “when the applicant claims an interest
4 relating to the property or transaction which is the subject of the action and he is so situated that
5 the disposition of the action may as a practical matter impair or impede his ability to protect
6 that interest, unless the applicant's interest is adequately represented by existing parties.”⁸

7 As a Safeco insured, Ms. Osborne clearly has an interest in the parties’ proposed
8 settlement that provides both non-monetary relief to policy holders and claimants and monetary
9 relief that ensures that health care providers who have claims against Safeco for reductions
10 taken to their bills are compensated. Ms. Osborne’s bill for treatment by Dr. Kerbs was reduced
11 using UCR85 reductions. She has an interest in this case in making sure that Dr. Kerbs’ claim
12 for reimbursement of those reductions is satisfied so that she does not have to pay them. Her
13 request for intervention is timely as trial of the action has not yet begun, no judgment has been
14 entered and the parties have only recently reached settlement of the claims. Accordingly, the
15 Court should exercise its discretion by permitting Ms. Osborne to intervene.

16 **C. Certification of Settlement Subclasses**

17 As discussed above, in order to ensure complete relief is provided, the Court should
18 certify a settlement class that consists of three subclasses. The decision to grant certification of
19 the proposed subclasses is within the Court’s discretion and the requirements of CR 23 are
20 applied less stringently when a request is made for certification of a settlement class than a
21 litigation class because the claims need not be proven. *See, e.g., Pickett, supra*. Here, the Court
22 certified a litigation class and found that the requirements of CR 23(a) and (b)(3) were met. The
23 requirements of CR 23(a) and (b)(3) are met with regard to the proposed settlement subclasses.

24 ⁸ Washington courts liberally construe CR 24 in favor of intervention. *See, Columbia Gorge Audubon Soc’y v.*
25 *Klickitat County*, 98 Wn. App. 618, 623 (1999). Whether to permit permissive intervention under CR 24(b)(2) is
26 within the discretion of the trial court and will only be reversed upon a clear showing of abuse of discretion. *See,*
Ford v. Logan, 79 Wn.2d 147, 150 (1971). “An abuse of discretion exists only when no reasonable person would
take the position adopted by the trial court.” *Board of Regents v. Seattle*, 108 Wn.2d 545, 557 (1987).

1 The same common issues of fact and law exist and each of the proposed subclasses is estimated
2 to have over 1000 potential members making joinder impracticable. Breskin Decl. ¶ 14. Under
3 CR 23(b) (3), common issues predominate with regard to the claims of the subclasses because
4 liability need not be proven and the claims process created by the settlement makes resolution
5 of the claims manageable. A similar process was approved by Judge Downing in *Allstate*. See,
6 Breskin Decl. Ex. 2. As discussed, the reason for the subclasses is to ensure that policy holders
7 and patients who paid the provider for the UCR85 reductions are able to recoup their payments.

8 **D. Appointment of Class Counsel and Class Representatives**

9 The Court already determined that Mr. Breskin and Breskin Johnson & Townsend are
10 adequate litigation class counsel. Accordingly, they will be able to adequately represent the
11 settlement classes. Dr. Kerbs was found to be an adequate representative of the subclass of
12 providers. Ms. Osborne is an adequate representative of the policy holder and claimant
13 subclasses because she is a Safeco insured whose bill was reduced using a UCR85 reduction,
14 she is knowledgeable about the claims and she has no interests that are in conflict with the
15 interests of the subclasses she seeks to represent. CR 23(a)(4).

16 **E. The Proposed Form of Class Notice is Appropriate**

17 The form of proposed notice is similar to the notice provided in the *Allstate* case
18 approved by Judge Downing. See, Mot. for Approval, Breskin Decl. Ex. 2.

19 **F. Dates for Class Member Objections and Exclusions**

20 Plaintiff proposes that class members receive 30 days notice in which to exercise their
21 rights to object to the settlement and/or seek exclusion. Thirty days is the usual amount of time
22 provided and sufficient because the vast majority of class members are health care providers
23 who are familiar with the issues and will be able to respond promptly. The proposed notice
24 period is also similar to the period approved by Judge Downing in *Allstate*. See, Ex. 2 at 8.

25 **G. The Proposed Claim Form is Appropriate**

26 The claim form is similar to the claim form approved by Judge Downing as well. *Id.*

1 **V. CONCLUSION**

2 For the above stated reasons, Plaintiff requests that the Court grant Plaintiff's motion to
3 approve settlement.

4 DATED the 17th day of May , 2012.

5 BRESKIN JOHNSON & TOWNSEND PLLC

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CERTIFICATE OF SERVICE

I, Sylvia Louise Rollins, hereby certify that a true copy of the foregoing was served this 17th day of May, 2012, to the following attorneys of record in the manner indicated below:

/s/ Sylvia Louise Rollins
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