

## Notice of Withdrawal

**Instructions:** If the Claimant decides to withdraw a demand, the Claimant(s) or Counsel shall serve a notice of withdrawal upon Respondent, The Neutral Arbitrator, and the Independent Administrator. This form must be signed by all Claimant(s) or Counsel. Please sign this form and return it to the Independent Administrator as soon as possible. When we receive this notice, we will close the arbitration. See Rule 40. Return this form to:

Office of the Independent Administrator  
635 S. Hobart Blvd., #A35  
Los Angeles, CA 90005  
Fax: 213-637-8658  
Email: oia@oia-kaiserarb.com

**Arbitration Name:** \_\_\_\_\_

**Arbitration Number:** \_\_\_\_\_

---

I withdraw the above referenced arbitration against Kaiser on behalf of the claimant(s).

\_\_\_\_\_  
Signature of Counsel

\_\_\_\_\_  
Date

I/We withdraw my/our claim against Kaiser.

\_\_\_\_\_  
Claimant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Claimant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Claimant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Claimant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Claimant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Claimant

\_\_\_\_\_  
Date