

# W A I V E R

## SUPREME COURT OF THE UNITED STATES

No. 24-822

Alejandro Alers, Jr.

(Petitioner)

Olympia Medical Center, et al.

V.

(Respondent)

I DO NOT INTEND TO FILE A RESPONSE to the petition for a writ of certiorari unless one is requested by the Court.

Please check the appropriate box:

- ☐ I am filing this waiver on behalf of all respondents.
- ☒ I only represent some respondents. I am filing this waiver on behalf of the following respondent(s):

Sara Kossuth, D.O.

Please check the appropriate box:

- ☒ I am a member of the Bar of the Supreme Court of the United States. (Filing Instructions: File a signed Waiver in the Supreme Court Electronic Filing System. The system will prompt you to enter your appearance first.)
- ☐ I am not presently a member of the Bar of this Court. Should a response be requested, the response will be filed by a Bar member. (Filing Instructions: Mail the original signed form to: Supreme Court, Attn: Clerk's Office, 1 First Street, NE, Washington, D.C. 20543).

Signature:

Denise H. Greer

Digitally signed by Denise H. Greer  
Date: 2025.02.04 12:30:40 -08'00'

Date:

2/4/25

(Type or print) Name

Denise H. Greer, Esq.

☐ Mr. ☒ Ms. ☐ Mrs. ☐ Miss

Firm

Schmid & Voiles

Address

333 South Hope Street, 12th Floor

City & State

Los Angeles, CA

Zip 90071

Phone

213-473-8608

Email

dgreer@schmidvoiles.com

A copy of this form must be sent to petitioner's counsel or to petitioner if *pro se*. Please indicate below the name(s) of the recipient(s) of a copy of this form. No additional certificate of service or cover letter is required.

cc:

Alejandro Alers, Jr., Pro Se Petitioner  
611 North Park Avenue, Inglewood, CA 90302  
5718alejo@gmail.com