

FOR COURT USE ONLY

FILED

FEB 19 2016

JAMES M. KIM, Court Executive Officer
MARIN COUNTY SUPERIOR COURT
By: S. Hernandez, Deputy

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):
Warren M. Klein State Bar No. 303958
THE CHANLER GROUP, 2560 Ninth St., Suite 214, Berkeley, 94710
TELEPHONE NO.: (510)848-8880 FAX NO. (Optional):
E-MAIL ADDRESS (Optional): warren@chanler.com
ATTORNEY FOR (Name): Plaintiff, Paul Wozniak

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Marin
STREET ADDRESS: 3501 Civic Center Drive
MAILING ADDRESS:
CITY AND ZIP CODE: San Rafael 94903
BRANCH NAME: Marin County Superior Court

PLAINTIFF/PETITIONER: Paul Wozniak
DEFENDANT/RESPONDENT: Sur La Table, Inc., et al.

REQUEST FOR DISMISSAL

CASE NUMBER: CIV1501085

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) [x] Without prejudice
b. (1) [] Complaint (2) [] Petition
(3) [] Cross-complaint filed by (name): on (date):
(4) [] Cross-complaint filed by (name): on (date):
(5) [x] Entire action of all parties and all causes of action
(6) [] Other (specify):* SUR LA TABLE, INC and DOE DEFENDANTS 1-150

2. (Complete in all cases except family law cases.)

The court [] did [x] 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: February 16, 2016

Warren M. Klein
(TYPE OR PRINT NAME OF [] ATTORNEY [] PARTY WITHOUT ATTORNEY)

[Signature]

(SIGNATURE)

*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:

- [x] Plaintiff/Petitioner [] Defendant/Respondent
[] Cross-Complainant

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

Date:

(TYPE OR PRINT NAME OF [] ATTORNEY [] PARTY WITHOUT ATTORNEY)

[Signature]

(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

(To be completed by clerk)

4. [x] Dismissal entered as requested on (date): FEB 19 2016

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):
b. [] Attorney or party without attorney not notified. Filing party failed to provide
[] a copy to be conformed [] means to return conformed copy

JAMES M. KIM

S. HERNANDEZ

Date: FEB 19 2016 Clerk, by _____, Deputy

PLAINTIFF/PETITIONER: Paul Wozniak DEFENDANT/RESPONDENT: Sur La Table, Inc., et al.	CASE NUMBER: CIV1501085
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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)

1 **PROOF OF SERVICE**

2 I am over 18 years of age and not a party to this action. I am employed in the county where
3 the mailing took place. My business address is 2560 Ninth Street, Parker Plaza, Suite 214,
4 Berkeley, California 94710-2565.

5 On February 16, 2016 I caused to be served the following document(s), described as,

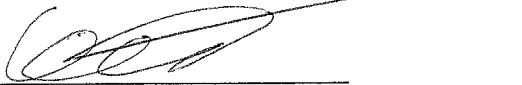
6 **REQUEST FOR DISMISSAL**

7 on each interested party as follows:

8 Todd O. Maiden, Esq.
9 Reed Smith LLP
10 101 Second Street, Suite 1800
11 San Francisco, CA 94105-3659
12 *Attorneys for Sur La Table, Inc.*

13 XXXXX (BY MAIL) I placed a true and correct copy of the foregoing document(s) in a sealed
14 envelope addressed to each interested party as set forth above. I placed each such envelope, with
15 postage thereon fully prepaid, for collection and mailing at The Chanler Group, located in Berkeley,
16 California. I am readily familiar with The Chanler Group's practice for collection and processing of
17 documents for mailing with the United States Postal Service. Under that practice, the documents
18 are deposited with the United States Postal Service on the same day in the ordinary course of
19 business.

20 Executed this 16th day of February 2016, at Berkeley, California. I declare under the penalty
21 of perjury under the laws of the State of California that the foregoing is true and correct.

22 
23 _____
24 William Orenstein