

ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: <b>Clifford A. Chanler</b> FIRM NAME: <b>THE CHANLER GROUP</b> STREET ADDRESS: <b>2550 Ninth Street, Suite 205</b> CITY: <b>Berkeley</b> STATE: <b>CA</b> ZIP CODE: <b>94710</b> TELEPHONE NO.: <b>(510) 848-8880</b> FAX NO.: <b>(510) 848-8118</b> E-MAIL ADDRESS: <b>clifford@chanler.com</b> ATTORNEY FOR (Name): <b>Plaintiff, Peter Englander</b>		<b>Electronically Filed</b> <b>by Superior Court of CA,</b> <b>County of Santa Clara,</b> <b>on 5/23/2019 2:20 PM</b> <b>Reviewed By: A. Floresca</b> <b>Case #17CV319930</b> <b>Envelope: 2921641</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara</b> STREET ADDRESS: <b>191 North First Street</b> MAILING ADDRESS: CITY AND ZIP CODE: <b>San Jose, CA 95113</b> BRANCH NAME: <b>Downtown Superior Court</b>		
Plaintiff/Petitioner: <b>PETER ENGLANDER</b> Defendant/Respondent: <b>GLAZE, INC., et al.</b>		
<b>REQUEST FOR DISMISSAL</b>		CASE NUMBER: <b>17CV319930</b>
<b>A conformed copy will not be returned by the clerk unless a method of return is provided with the document.</b>		
<b>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.)</b>		


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): on (date):
- (4) ☐ Cross-complaint filed by (name): on (date):
- (5) ☒ Entire action of all parties and all causes of action
- (6) ☐ Other (specify):\*
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: May 23, 2019

Clifford A. Chanler

(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.

  
(SIGNATURE)

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:

(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).

  
(SIGNATURE)

Attorney or party without attorney for:

☐ Plaintiff/Petitioner ☐ Defendant/Respondent  
☐ Cross Complainant

(To be completed by clerk)

4. ☒ Dismissal entered as requested on (date): **5/23/2019 2:20 PM**
5. ☐ Dismissal entered on (date): as to only (name):
6. ☐ Dismissal **not entered** as requested for the following reasons (specify):

**5/23/2019 2:20 PM**

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 **Clerk of Court**

/s/ A. Floresca

Date: **5/23/2019 2:20 PM** Clerk, by \_\_\_\_\_, Deputy

Plaintiff/Petitioner: PETER ENGLANDER Defendant/Respondent: GLAZE, INC., et al.	CASE NUMBER: 17CV319930
--	----------------------------

**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  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

**PROOF OF SERVICE**

I am over 18 years of age and not a party to this action. I am employed in the county where the mailing took place. My business address is 2550 Ninth Street, Suite 205, Berkeley, California 94710.

On May 23, 2019, I caused the following document(s) to be served, described as:

**REQUEST FOR DISMISSAL**

on each interested party as follows:

David A. Makman, Esq.  
Law Offices of David A. Makman  
655 Mariner's Island Blvd., Ste 306  
San Mateo, CA 94404  
*Attorneys for Midwest Trading, Inc.*

[ X ] (BY MAIL) I placed a true and correct copy of the foregoing document(s) in a sealed envelope addressed to each interested party as set forth above. I placed each such envelope, with postage thereon fully prepaid, for collection and mailing in one of the United States Post Office Boxes located outside of the Parker Plaza Office Complex, located at 2560 Ninth Street, Berkeley, California.

Executed this 23rd day of May 2019, at Berkeley, California, I declare under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.



---

Lindsey Cady