CIV-110

ATTORNEY OR PARTY WITHOUT ATTORNEY:	STATE BAR NO: 135534	FOR COURT USE ONLY
NAME: Clifford A. Chanler		
FIRM NAME: THE CHANLER GROUP		
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CITY: Berkeley	STATE: CA ZIP CODE: 94710	
TELEPHONE NO.: (510) 848-8880	FAX NO.: (510) 848-8118	
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ATTORNEY FOR (Name): Plaintiff, Laurence Vinocur		

FILED/ENDORSED
APR 17 2019
By: R. Castillo
Deputy Clerk

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Sacramento	
STREET ADDRESS: 720 9th Street	
MAILING ADDRESS:	
CITY AND ZIP CODE: Sacramento 95814	
BRANCH NAME: Unlimited Civil	
Plaintiff/Petitioner: Laurence Vinocur Defendant/Respondent: Paper House Productions, Inc., et al.	
REQUEST FOR DISMISSAL	CASE NUMBER: 34-2019-00253144

BY FAX

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) [X] 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)*:*

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: April 17, 2019
Clifford A. Chanler
(TYPE OR PRINT NAME OF [X] ATTORNEY [ ] PARTY WITHOUT ATTORNEY)

▶ Clifford A. Chanler
(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)

** 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)*: APR 17 2019
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

Date: APR 17 2019 Clerk, by R. Castillo, Deputy

Form Adopted for Mandatory Use
Judicial Council of California
CIV-110 (Rev. Jan. 1, 2013)

REQUEST FOR DISMISSAL

Code of Civil Procedure, § 581 et seq.; Gov. Code, § 68637(c); Cal. Rules of Court, rule 3.1390
www.courts.ca.gov

Plaintiff/Petitioner: Laurence Vinocur Defendant/Respondent: Paper House Productions, Inc., et al.	CASE NUMBER: 34-2019-00253144

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)