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ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO: 77315
 NAME: Steven L. Martin, Esq.
 FIRM NAME: Law Offices of Steven L. Martin
 STREET ADDRESS: 11900 West Olympic Boulevard, Suite 700
 CITY: Los Angeles STATE: CA ZIP CODE: 90064
 TELEPHONE NO.: 310-479-2345 FAX NO.: 310-479-2346
 E-MAIL ADDRESS: smartin@slmartinlaw.com
 ATTORNEY FOR (Name): Plaintiff Facts 'n Figures, Inc.

FOR COURT USE ONLY

FILED
 Superior Court of California
 County of Los Angeles

APR 06 2018

Sherri R. Carter, Executive Officer/Clerk
 By Patricia Cortez Deputy

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES
 STREET ADDRESS: 111 North Hill Street
 MAILING ADDRESS: Same
 CITY AND ZIP CODE: Los Angeles CA 90012-3115
 BRANCH NAME: Central District, Stanley Mosk Courthouse

REC'D
 APR 06 2018
 FILING WINDOW

Plaintiff/Petitioner: Facts 'n Figures, Inc., etc.
 Defendant/Respondent: Galleria Park Partners, LLC, etc., et al.

REQUEST FOR DISMISSAL

CASE NUMBER: BC 587 876

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.)

- TO THE CLERK: Please **dismiss** this action as follows:
 - With prejudice (2) Without prejudice
 - Complaint (2) Petition
 - Cross-complaint filed by (name): on (date):
 - Cross-complaint filed by (name): on (date):
 - Entire action of all parties and all causes of action
 - 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: April 5, 2018
 Steven L. Martin
 (TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)

(SIGNATURE)
 Attorney or party without attorney for:
 Plaintiff/Petitioner Defendant/Respondent
 Cross Complainant

*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.

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

(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)

(SIGNATURE)
 Attorney or party without attorney for:
 Plaintiff/Petitioner Defendant/Respondent
 Cross Complainant

** 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).

- (To be completed by clerk)
- Dismissal entered as requested on (date): 4-6-18
 - Dismissal entered on (date): as to only (name):
 - Dismissal not entered as requested for the following reasons (specify):

- Attorney or party without attorney notified on (date):
 - Attorney or party without attorney not notified. Filing party failed to provide a copy to be conformed means to return conformed copy
- Date: 4-6-18 Clerk, by _____ Deputy

(SIGNATURE)
 Deputy

Plaintiff/Petitioner: Facts 'n Figures, Inc., etc. Defendant/Respondent: Galleria Park Partners, LLC, etc., et al.	CASE NUMBER: BC 587 876
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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)

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PROOF OF SERVICE

STATE OF CALIFORNIA, COUNTY OF LOS ANGELES

I am employed in the County of Los Angeles, State of California. I am over the age of 18 and not a party to the within action; my business address is 11900 West Olympic Boulevard, Suite 700, Los Angeles CA 90064-1045. I am employed in the office of a member of the bar of this court at whose direction the service was made.

On the date set forth below, I served the foregoing document described as:

REQUEST FOR DISMISSAL

on the interested parties in this action listed below:

Guy R. Gruppie, Esq. Tina Vo, Esq. Murchison & Cumming, LLP 801 South Grand Avenue, 9th Floor Los Angeles CA 90017-4613 (O) (213) 623-7400; (213) 630-1068 [TV] (F) (213) 623-6336 (E) tvo@murchisonlaw.com	
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XX BY ELECTRONIC MAIL (EMAIL). Based on an agreement between the parties to accept service by electronic mail (email), I transmitted the document electronically to the person at their email address listed above. The transmission was reported as complete and without error.

XX VIA U.S. MAIL: I deposited such envelope in the mail at Los Angeles, California, with the postage thereon fully prepaid.

I declare under penalty of perjury under the laws of the State of California that the above is true and correct.

Executed on April 6, 2018, at Los Angeles, California.



Ann Marie Nelsen

FILED
APR 11 2018
LOS ANGELES
COUNTY CLERK