

# REQUEST FOR JUDICIAL INTERVENTION

UCS-840 (7/2012)

**Supreme** \_\_\_\_\_ **COURT, COUNTY OF** New York

**Index No:** \_\_\_\_\_ **Date Index Issued:** 04/28/2015

**CAPTION:** Enter the complete case caption. Do not use et al or et ano. If more space is required, attach a caption rider sheet.

RESTAURANT ACTION ALLIANCE NYC, CECILIO ALBAYERO, JOSE CASTILLO, MAXIMILIANO GONZALES, ANDRES JAVIER-MORALES, ARISMENDY JEREZ, TONY JUELA, RUPERTO MOROCHO, ASTRID PORTILLO, SERGIO SANCHEZ, LUCINO RAMOS, ESMERALDA VALENCIA, PLASTICS RECYCLING INC., DART CONTAINER CORPORATION, PACTIV LLC, GENPAK LLC, COMMODORE PLASTICS LLC, and REYNOLDS CONSUMER PRODUCTS LLC,

Plaintiff(s)/Petitioner(s)

-against-

THE CITY OF NEW YORK; KATHRYN GARCIA, in her official capacity as Commissioner of the New York City Department of Sanitation; the NEW YORK CITY DEPARTMENT OF SANITATION, a charter-mandated agency; and BILL DE BLASIO, in his official capacity as Mayor of the City of New York

Defendant(s)/Respondent(s)

**NATURE OF ACTION OR PROCEEDING:** Check ONE box only and specify where indicated.

**MATRIMONIAL**

Contested  
**NOTE:** For all Matrimonial actions where the parties have children under the age of 18, complete and attach the **MATRIMONIAL RJJ Addendum**.  
 For Uncontested Matrimonial actions, use RJJ form UD-13.

**TORTS**

Asbestos  
 Breast Implant  
 Environmental: \_\_\_\_\_ (specify)  
 Medical, Dental, or Podiatric Malpractice  
 Motor Vehicle  
 Products Liability: \_\_\_\_\_ (specify)  
 Other Negligence: \_\_\_\_\_ (specify)  
 Other Professional Malpractice: \_\_\_\_\_ (specify)  
 Other Tort: \_\_\_\_\_ (specify)

**OTHER MATTERS**

Certificate of Incorporation/Dissolution [see NOTE under Commercial]  
 Emergency Medical Treatment  
 Habeas Corpus  
 Local Court Appeal  
 Mechanic's Lien  
 Name Change  
 Pistol Permit Revocation Hearing  
 Sale or Finance of Religious/Not-for-Profit Property  
 Other: \_\_\_\_\_ (specify)

**COMMERCIAL**

Business Entity (including corporations, partnerships, LLCs, etc.)  
 Contract  
 Insurance (where insurer is a party, except arbitration)  
 UCC (including sales, negotiable instruments)  
 Other Commercial: \_\_\_\_\_ (specify)

**NOTE:** For Commercial Division assignment requests [22 NYCRR § 202.70(d)], complete and attach the **COMMERCIAL DIV RJJ Addendum**.

**REAL PROPERTY:** How many properties does the application include? \_\_\_\_\_

Condemnation  
 Mortgage Foreclosure (specify):  Residential  Commercial  
 Property Address: \_\_\_\_\_  
Street Address City State Zip

**NOTE:** For Mortgage Foreclosure actions involving a one- to four-family, owner-occupied, residential property, or an owner-occupied condominium, complete and attach the **FORECLOSURE RJJ Addendum**.

Tax Certiorari - Section: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Foreclosure  
 Other Real Property: \_\_\_\_\_ (specify)

**SPECIAL PROCEEDINGS**

CPLR Article 75 (Arbitration) [see NOTE under Commercial]  
 CPLR Article 78 (Body or Officer)  
 Election Law  
 MHL Article 9.60 (Kendra's Law)  
 MHL Article 10 (Sex Offender Confinement-Initial)  
 MHL Article 10 (Sex Offender Confinement-Review)  
 MHL Article 81 (Guardianship)  
 Other Mental Hygiene: \_\_\_\_\_ (specify)  
 Other Special Proceeding: \_\_\_\_\_ (specify)

**STATUS OF ACTION OR PROCEEDING:** Answer YES or NO for EVERY question AND enter additional information where indicated.

	YES	NO	
Has a summons and complaint or summons w/notice been filed?	<input type="radio"/>	<input checked="" type="radio"/>	If yes, date filed: _____
Has a summons and complaint or summons w/notice been served?	<input type="radio"/>	<input checked="" type="radio"/>	If yes, date served: _____
Is this action/proceeding being filed post-judgment?	<input type="radio"/>	<input checked="" type="radio"/>	If yes, judgment date: _____

**For Court Clerk Use Only:**

IAS Entry Date \_\_\_\_\_

---

Judge Assigned \_\_\_\_\_

---

RJJ Date \_\_\_\_\_

SUPREME COURT  
 NEW YORK COUNTY  
 EX-PARTE MOTION PART

APR 28 2015

[Signature]

RECEIVED

APR 28 2015

NEW YORK COUNTY CLERK'S OFFICE

**NATURE OF JUDICIAL INTERVENTION:** Check ONE box only AND enter additional information where indicated.

- Infant's Compromise
- Note of Issue and/or Certificate of Readiness
- Notice of Medical, Dental, or Podiatric Malpractice Date Issue Joined: \_\_\_\_\_
- Notice of Motion Relief Sought: \_\_\_\_\_ Return Date: \_\_\_\_\_
- Notice of Petition Relief Sought: \_\_\_\_\_ Return Date: \_\_\_\_\_
- Order to Show Cause Relief Sought: Discovery Return Date: \_\_\_\_\_
- Other Ex Parte Application Relief Sought: \_\_\_\_\_
- Poor Person Application
- Request for Preliminary Conference
- Residential Mortgage Foreclosure Settlement Conference
- Writ of Habeas Corpus
- Other (specify): \_\_\_\_\_

**RELATED CASES:** List any related actions. For Matrimonial actions, include any related criminal and/or Family Court cases. If additional space is required, complete and attach the RJJ Addendum. If none, leave blank.

Case Title	Index/Case No.	Court	Judge (if assigned)	Relationship to Instant Case

**PARTIES:** For parties without an attorney, check "Un-Rep" box AND enter party address, phone number and e-mail address in space provided. If additional space is required, complete and attach the RJJ Addendum.

Un-Rep	Parties:	Attorneys and/or Unrepresented Litigants:	Issue Joined (Y/N):	Insurance Carrier(s):
<input type="checkbox"/>	Restaurant Action Alliance NYC Last Name  First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy Last Name First Name Gibson Dunn & Crutcher LLP Firm Name 200 Park Avenue New York New York 10166 Street Address City State Zip +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Jerez Last Name  Arismendy First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy Last Name First Name Gibson Dunn & Crutcher LLP Firm Name 200 Park Avenue New York New York 10166 Street Address City State Zip +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Albayero Last Name  Cecilio First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy Last Name First Name Gibson Dunn & Crutcher LLP Firm Name 200 Park Avenue New York New York 10166 Street Address City State Zip +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Ramos Last Name  Luciano First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy Last Name First Name Gibson Dunn & Crutcher LLP Firm Name 200 Park Avenue New York New York 10166 Street Address City State Zip +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None

I AFFIRM UNDER THE PENALTY OF PERJURY THAT, TO MY KNOWLEDGE, OTHER THAN AS NOTED ABOVE, THERE ARE AND HAVE BEEN NO RELATED ACTIONS OR PROCEEDINGS, NOR HAS A REQUEST FOR JUDICIAL INTERVENTION PREVIOUSLY BEEN FILED IN THIS ACTION OR PROCEEDING.

Dated: 04/28/2015

*Randy M. Mastro*  
SIGNATURE

1792548

Randy M. Mastro

ATTORNEY REGISTRATION NUMBER

PRINT OR TYPE NAME

# Request for Judicial Intervention Addendum

**Supreme** COURT, COUNTY OF **New York** Index No: \_\_\_\_\_

**For use when additional space is needed to provide party or related case information.**

**PARTIES:** For parties without an attorney, check "Un-Rep" box AND enter party address, phone number and e-mail address in "Attorneys" space.

Un-Rep	Parties:	Attorneys and/or Unrepresented Litigants:	Issue Joined (Y/N):	Insurance Carrier(s):
<input type="checkbox"/>	Gonzales <div style="text-align: right; font-size: small;">Last Name</div> Maximiliano <div style="text-align: right; font-size: small;">First Name</div> Primary Role: Petitioner Secondary Role (if any):	Mastro <div style="text-align: right; font-size: small;">Last Name</div> Randy <div style="text-align: right; font-size: small;">First Name</div> Gibson Dunn & Crutcher LLP <div style="text-align: right; font-size: small;">Firm Name</div> 200 Park Avenue <div style="text-align: right; font-size: small;">Street Address</div> New York City New York 10166 <div style="text-align: right; font-size: small;">City State Zip</div> +1 (212) 351-4000 +1 (212) 351-4035 <div style="text-align: right; font-size: small;">Phone Fax</div> rmastro@gibsondunn.com <div style="text-align: right; font-size: small;">e-mail</div>	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Javier-Morales <div style="text-align: right; font-size: small;">Last Name</div> Andres <div style="text-align: right; font-size: small;">First Name</div> Primary Role: Petitioner Secondary Role (if any):	Mastro <div style="text-align: right; font-size: small;">Last Name</div> Randy <div style="text-align: right; font-size: small;">First Name</div> Gibson Dunn & Crutcher LLP <div style="text-align: right; font-size: small;">Firm Name</div> 200 Park Avenue <div style="text-align: right; font-size: small;">Street Address</div> New York City New York 10166 <div style="text-align: right; font-size: small;">City State Zip</div> +1 (212) 351-4000 +1 (212) 351-4035 <div style="text-align: right; font-size: small;">Phone Fax</div> rmastro@gibsondunn.com <div style="text-align: right; font-size: small;">e-mail</div>	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Juela <div style="text-align: right; font-size: small;">Last Name</div> Tony <div style="text-align: right; font-size: small;">First Name</div> Primary Role: Petitioner Secondary Role (if any):	Mastro <div style="text-align: right; font-size: small;">Last Name</div> Randy <div style="text-align: right; font-size: small;">First Name</div> Gibson Dunn & Crutcher LLP <div style="text-align: right; font-size: small;">Firm Name</div> 200 Park Avenue <div style="text-align: right; font-size: small;">Street Address</div> New York City New York 10166 <div style="text-align: right; font-size: small;">City State Zip</div> +1 (212) 351-4000 +1 (212) 351-4035 <div style="text-align: right; font-size: small;">Phone Fax</div> rmastro@gibsondunn.com <div style="text-align: right; font-size: small;">e-mail</div>	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Sanchez <div style="text-align: right; font-size: small;">Last Name</div> Sergio <div style="text-align: right; font-size: small;">First Name</div> Primary Role: Petitioner Secondary Role (if any):	Mastro <div style="text-align: right; font-size: small;">Last Name</div> Randy <div style="text-align: right; font-size: small;">First Name</div> Gibson Dunn & Crutcher LLP <div style="text-align: right; font-size: small;">Firm Name</div> 200 Park Avenue <div style="text-align: right; font-size: small;">Street Address</div> New York City New York 10166 <div style="text-align: right; font-size: small;">City State Zip</div> +1 (212) 351-4000 +1 (212) 351-4035 <div style="text-align: right; font-size: small;">Phone Fax</div> rmastro@gibsondunn.com <div style="text-align: right; font-size: small;">e-mail</div>	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Valencia <div style="text-align: right; font-size: small;">Last Name</div> Esmeralda <div style="text-align: right; font-size: small;">First Name</div> Primary Role: Petitioner Secondary Role (if any):	Mastro <div style="text-align: right; font-size: small;">Last Name</div> Randy <div style="text-align: right; font-size: small;">First Name</div> Gibson Dunn & Crutcher LLP <div style="text-align: right; font-size: small;">Firm Name</div> 200 Park Avenue <div style="text-align: right; font-size: small;">Street Address</div> New York City New York 10166 <div style="text-align: right; font-size: small;">City State Zip</div> +1 (212) 351-4000 +1 (212) 351-4035 <div style="text-align: right; font-size: small;">Phone Fax</div> rmastro@gibsondunn.com <div style="text-align: right; font-size: small;">e-mail</div>	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Castillo <div style="text-align: right; font-size: small;">Last Name</div> Jose <div style="text-align: right; font-size: small;">First Name</div> Primary Role: Petitioner Secondary Role (if any):	Mastro <div style="text-align: right; font-size: small;">Last Name</div> Randy <div style="text-align: right; font-size: small;">First Name</div> Gibson Dunn & Crutcher LLP <div style="text-align: right; font-size: small;">Firm Name</div> 200 Park Avenue <div style="text-align: right; font-size: small;">Street Address</div> New York City New York 10166 <div style="text-align: right; font-size: small;">City State Zip</div> +1 (212) 351-4000 +1 (212) 351-4035 <div style="text-align: right; font-size: small;">Phone Fax</div> rmastro@gibsondunn.com <div style="text-align: right; font-size: small;">e-mail</div>	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None

**RELATED CASES:** List any related actions. For Matrimonial actions, include any related criminal and/or Family Court cases.

Case Title	Index/Case No.	Court	Judge (if assigned)	Relationship to Instant Case

# Request for Judicial Intervention Addendum

**Supreme**

COURT, COUNTY OF                     New York                    

Index No: \_\_\_\_\_

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**PARTIES:** For parties without an attorney, check "Un-Rep" box AND enter party address, phone number and e-mail address in "Attorneys" space.

Un-Rep	Parties:	Attorneys and/or Unrepresented Litigants:	Issue Joined (Y/N):	Insurance Carrier(s):
<input type="checkbox"/>	Morocho <small style="display: block; text-align: right;">Last Name</small> Ruperto <small style="display: block; text-align: right;">First Name</small> Primary Role: Petitioner Secondary Role (if any):	Mastro <small style="display: block; text-align: right;">Last Name</small> Randy <small style="display: block; text-align: right;">First Name</small> Gibson Dunn & Crutcher LLP <small style="display: block; text-align: right;">Firm Name</small> 200 Park Avenue <small style="display: block; text-align: right;">Street Address</small> New York <small style="display: block; text-align: right;">City</small> New York <small style="display: block; text-align: right;">State</small> 10166 <small style="display: block; text-align: right;">Zip</small> +1 (212) 351-4000 <small style="display: block; text-align: right;">Phone</small> +1 (212) 351-4035 <small style="display: block; text-align: right;">Fax</small> rmastro@gibsondunn.com <small style="display: block; text-align: right;">e-mail</small>	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Portillo <small style="display: block; text-align: right;">Last Name</small> Astrid <small style="display: block; text-align: right;">First Name</small> Primary Role: Petitioner Secondary Role (if any):	Mastro <small style="display: block; text-align: right;">Last Name</small> Randy <small style="display: block; text-align: right;">First Name</small> Gibson Dunn & Crutcher LLP <small style="display: block; text-align: right;">Firm Name</small> 200 Park Avenue <small style="display: block; text-align: right;">Street Address</small> New York <small style="display: block; text-align: right;">City</small> New York <small style="display: block; text-align: right;">State</small> 10166 <small style="display: block; text-align: right;">Zip</small> +1 (212) 351-4000 <small style="display: block; text-align: right;">Phone</small> +1 (212) 351-4035 <small style="display: block; text-align: right;">Fax</small> rmastro@gibsondunn.com <small style="display: block; text-align: right;">e-mail</small>	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Last Name  First Name Primary Role:  Secondary Role (if any):	Last Name  Firm Name  Street Address  City  State  Zip  Phone  Fax  e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Last Name  First Name Primary Role:  Secondary Role (if any):	Last Name  Firm Name  Street Address  N City  New York State  Zip  Phone  Fax  e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Last Name  First Name Primary Role:  Secondary Role (if any):	Last Name  Firm Name  Street Address  City  State  Zip  Phone  Fax  e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Last Name  First Name Primary Role:  Secondary Role (if any):	Last Name  Firm Name  Street Address  New York City  New York State  Zip  20 Phone  Fax  e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None

**RELATED CASES:** List any related actions. For Matrimonial actions, include any related criminal and/or Family Court cases.

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Un-Rep	Parties:	Attorneys and/or Unrepresented Litigants:	Issue Joined (Y/N):	Insurance Carrier(s):
<input type="checkbox"/>	Plastics Recycling, Inc. <small>Last Name</small>  First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy <small>Last Name First Name</small> Gibson Dunn & Crutcher LLP <small>Firm Name</small> 200 Park Avenue New York City New York 10166 <small>Street Address City State Zip</small> +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com <small>Phone Fax e-mail</small>	YES <input type="radio"/>  NO <input checked="" type="radio"/>	None
<input type="checkbox"/>	Dart Container Corporation <small>Last Name</small>  First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy <small>Last Name First Name</small> Gibson Dunn & Crutcher LLP <small>Firm Name</small> 200 Park Avenue New York City New York 10166 <small>Street Address City State Zip</small> +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com <small>Phone Fax e-mail</small>	YES <input type="radio"/>  NO <input checked="" type="radio"/>	None
<input type="checkbox"/>	Pactiv LLC <small>Last Name</small>  First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy <small>Last Name First Name</small> Gibson Dunn & Crutcher LLP <small>Firm Name</small> 200 Park Avenue New York City New York 10166 <small>Street Address City State Zip</small> +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com <small>Phone Fax e-mail</small>	YES <input type="radio"/>  NO <input checked="" type="radio"/>	None
<input type="checkbox"/>	Genpak LLC <small>Last Name</small>  First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy <small>Last Name First Name</small> Gibson Dunn & Crutcher LLP <small>Firm Name</small> 200 Park Avenue New York City New York 10166 <small>Street Address City State Zip</small> +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com <small>Phone Fax e-mail</small>	YES <input type="radio"/>  NO <input checked="" type="radio"/>	None
<input type="checkbox"/>	Commodore Plastics, LLC <small>Last Name</small>  First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy <small>Last Name First Name</small> Gibson Dunn & Crutcher LLP <small>Firm Name</small> 200 Park Avenue New York City New York 10166 <small>Street Address City State Zip</small> +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com <small>Phone Fax e-mail</small>	YES <input type="radio"/>  NO <input checked="" type="radio"/>	None
<input type="checkbox"/>	Reynolds Consumer Products <small>Last Name</small>  First Name Primary Role: Petitioner  Secondary Role (if any):	Mastro Randy <small>Last Name First Name</small> Gibson Dunn & Crutcher LLP <small>Firm Name</small> 200 Park Avenue New York City New York 10166 <small>Street Address City State Zip</small> +1 (212) 351-4000 +1 (212) 351-4035 rmastro@gibsondunn.com <small>Phone Fax e-mail</small>	YES <input type="radio"/>  NO <input checked="" type="radio"/>	None

**RELATED CASES:** List any related actions. For Matrimonial actions, include any related criminal and/or Family Court cases.

Case Title	Index/Case No.	Court	Judge (if assigned)	Relationship to Instant Case

# Request for Judicial Intervention Addendum

Supreme

COURT, COUNTY OF                     New York                    

Index No: \_\_\_\_\_

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**PARTIES:** For parties without an attorney, check "Un-Rep" box AND enter party address, phone number and e-mail address in "Attorneys" space.

Un-Rep	Parties:	Attorneys and/or Unrepresented Litigants:	Issue Joined (Y/N):	Insurance Carrier(s):
<input type="checkbox"/>	City of New York Last Name  First Name Primary Role: Respondent Secondary Role (if any):	Provide attorney name, firm name, business address, phone number and e-mail address of all attorneys that have appeared in the case. For unrepresented litigants, provide address, phone number and e-mail address.  Corporation Counsel Firm Name New York City New York State 10007 Zip 100 Church Street Street Address Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Garcia Last Name Kathryn First Name Primary Role: Respondent Secondary Role (if any):	Corporation Counsel Firm Name New York City New York State 10007 Zip 100 Church Street Street Address Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	New York City Department of Sanitation Last Name First Name Primary Role: Respondent Secondary Role (if any):	Corporation Counsel Firm Name New York City New York State 10007 Zip 100 Church Street Street Address Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	De Blasio Last Name Bill First Name Primary Role: Respondent Secondary Role (if any):	Corporation Counsel Firm Name New York City New York State 10007 Zip 100 Church Street Street Address Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Last Name First Name Primary Role: Secondary Role (if any):	Last Name First Name Firm Name Street Address City State Zip Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None
<input type="checkbox"/>	Last Name First Name Primary Role: Secondary Role (if any):	Last Name First Name Firm Name Street Address City State Zip Phone Fax e-mail	<input type="radio"/> YES  <input checked="" type="radio"/> NO	None

**RELATED CASES:** List any related actions. For Matrimonial actions, include any related criminal and/or Family Court cases.

Case Title	Index/Case No.	Court	Judge (if assigned)	Relationship to Instant Case

SUPREME COURT OF THE STATE OF NEW YORK  
COUNTY OF NEW YORK

RESTAURANT ACTION ALLIANCE NYC, et al.

Index No.

100734 / 2015  
( ), J.)

Plaintiffs,

- against -

THE CITY OF NEW YORK, et al.

Defendants.

REDACTION COVER PAGE

CHECK ALL THAT APPLY:

- The document filed contains no confidential personal information, as defined in 22 NYCRR 202.5(e).
- The document filed is REDACTED in accordance with 22 NYCRR 202.5(e).
- The document filed is UN-REDACTED in accordance with 22 NYCRR 202.5(e).
- (a) The document filed contains SSN (as authorized by the order specified below).
- (b) The document filed contains confidential personal information as defined under 22 NYCRR 202.5(e) (as authorized by the order specified below).
- This document was previously filed REDACTED.  
Date:
- This document was previously filed UN-REDACTED.  
Date:
- The document filed seeks a remedy under 22 NYCRR 202.5(e)(2).
- The document filed seeks a remedy under 22 NYCRR 202.5(e)(3).
- Additional information:

There is a previously filed order of the Court regarding this document:

yes /  no

- Date of order:
- Date order filed:
- Other identifying information for such order:

The order of the Court is being filed with the redacted / un-redacted document:  yes /  no

- Date of order:
- Other identifying information for such order:

Signature of filer: Randy M. Mastro / sg

Print Name: Randy Mastro

Counsel appearing for: Petitioners (name of party)

Filer is Unrepresented / Pro se:  yes /  no

Date: \_\_\_\_\_