

# W A I V E R

## SUPREME COURT OF THE UNITED STATES

No. 23-287

Vernon Healthcare Center, et al.

(Petitioner)

Deborah Ann Blackmon, et al.

V.

(Respondent)

I DO NOT INTEND TO FILE A RESPONSE to the petition for a writ of certiorari unless one is requested by the Court.

**Please check the appropriate box:**

I am filing this waiver on behalf of all respondents.  
 I only represent some respondents. I am filing this waiver on behalf of the following respondent(s):

**Please check the appropriate box:**

I am a member of the Bar of the Supreme Court of the United States. (Filing Instructions: File a signed Waiver in the Supreme Court Electronic Filing System. The system will prompt you to enter your appearance first.)  
 I am not presently a member of the Bar of this Court. Should a response be requested, the response will be filed by a Bar member. (Filing Instructions: Mail the original signed form to: Supreme Court, Attn: Clerk's Office, 1 First Street, NE, Washington, D.C. 20543).

Signature:

Date:

9/25/23

(Type or print) Name **Lisa Trinh Flint**

Mr.

Ms.

Mrs.

Miss

Firm

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A copy of this form must be sent to petitioner's counsel or to petitioner if *pro se*. Please indicate below the name(s) of the recipient(s) of a copy of this form. No additional certificate of service or cover letter is required.

cc: **David Zarmi, Zarmi Law, 9190 W. Olympic Blvd., Ste. 191, Beverly Hills, CA 90212, P: (310) 841-6455, davidzarmi@gmail.com**