

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Mailing Address</i>): _____ _____ _____ _____ ATTORNEY FOR (<i>Name</i>): _____	TELEPHONE NO.: _____	FOR COURT USE ONLY
Insert name of court and name of judicial district and branch court if any: _____ _____		
PLAINTIFF/PETITIONER: _____ _____ DEFENDANT/RESPONDENT: _____ _____		
<p style="text-align: center;">REQUEST FOR DISMISSAL</p> <input type="checkbox"/> PERSONAL INJURY, PROPERTY DAMAGE, OR WRONGFUL DEATH <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other <input type="checkbox"/> Family Law <input type="checkbox"/> Eminent Domain <input type="checkbox"/> Other _____		CASE NUMBER: _____

— A conformed copy will not be returned by the clerk unless a method of return is provided with the document. —

1. **TO THE CLERK:** Please **dismiss** this action as follows:
- a. (1) With prejudice (2) Without prejudice
- b. (2) 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*): _____

Date: -----

.....
 (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, cause of action, or cross-complaints to be dismissed.

▶

 (SIGNATURE)

Attorney or party without attorney for:

Plaintiff/Petitioner Defendant/Respondent

Cross-complaint

2. **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-complaint (respondent) must sign this consent if required by Code of Civil Procedure section 581(f) or (j).

▶

 (SIGNATURE)

Attorney or party without attorney for:

Plaintiff/Petitioner Defendant/Respondent

Cross-complainant

(To be completed by clerk)

3. Dismissal entered as requested on (*date*):
4. Dismissal entered on (*date*): _____ as to only (*name*):
5. Dismissal **not entered** as requested for the following reasons (*specify*):
6. 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 conform means to return conformed copy

Date: _____ Clerk, by _____, Deputy