ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address):	TELEPHONE NO	FOR COURT USE ONLY
ATTORNEY FOR (Name):		
Insert name of court and name of judicial district and branch court, if any:		
PLAINTIFF/PETITIONER:		
DEFENDANT/RESPONDENT:		
NOTICE OF ENTRY OF DISMISSAL AND PROOF OF SI Personal Injury, Property Damage, or Wrongful Death Motor Vehicle Other Family Law Eminent Domain Other (specify):	ERVICE	CASE NUMBER:

TO ATTORNEYS AND PARTIES WITHOUT ATTORNEYS: A dismissal was entered in this action by the clerk as shown on the Request for Dismissal. (Attach a copy completed by the clerk.)

Date:	
(TYPE OR PRINT NAME OF 🔲 ATTORNEY 🔲 PARTY WITHOUT ATTORNEY)	(SIGNATURE)

PROOF OF SERVICE

- 1. I am over the age of 18 and not a party to this cause. I am a resident of or employed in the county where the mailing occurred. My residence or business address is:
- 2. I served a copy of the Notice of Entry of Dismissal and Request for Dismissal by mailing them, in a sealed envelope with postage fully prepaid, as follows:
 - I deposited the envelope with the United States Postal Service. a. |
 - I placed the envelope for collection and processing for mailing following this business's ordinary practice with b. which I am readily familiar. On the same day correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service.
 - c. Date of deposit:
 - d. Place of deposit (city and state):
 - e. Addressed as follows (name and address):

3. I served a copy of the Notice of Entry of Dismissal and Request for Dismissal by personally delivering copies to the person served as shown below: Name:

Date:
Date:

Time:

Address:

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

Date:

Form Adopted by the		Code of Civ	
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)		

)F ENTRY OF DISMISSAL AND PROOF OF SERVICE

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