NOTICE OF DISMISSAL

In The District Court of the First Circuit Division		
STATE OF HAWAI'I		
Plaintiff(s)		
		Reserved for Court Use
		Civil No.
Defendant(s)		Filing Party(ies)/Filing Party(ies)' Attorney (Name, Attorney Number, Firm Name (if applicable), Address, Telephone and Facsimile Numbers)
Court Date & Time:		
□ Return □ None □ Dispo	sition/Other	
NOTICE OF DISMISSAL Plaintiff(s) enters a DISMISSAL in the above entitled case (select one)		
	Signature of Plaintiff(s)/Plaintiff	C(s)' Attorney:
Date:	Print/Type Name:	
If you need an accommodation for a disability when participating in a court program, service or activity, please contact the ADA Coordinator as far in advance as possible to allow time to provide an accommodation. Call First Circuit (Oahu) (808) 538-5121; Second Circuit (Maui) (808) 244-2855; Third		



Circuit (Hawaii Island): Hilo (808) 961-7629, Kona (808) 961-7629; or Fifth Circuit (Kauai) (808) 482-2347; or send an e-mail to adarequest@courts.hawaii.gov. The ADA Coordinator will work to provide, but cannot guarantee, the requested auxiliary aid, service or accommodation.