

<div>IN THE DISTRICT COURT OF THE FIRST CIRCUIT</div> <div>_____ DIVISION</div> <div>STATE OF HAWAI‘I</div>	
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: <div><input type="checkbox"/> Return</div> <div><input type="checkbox"/> None      <input type="checkbox"/> Disposition/Other</div>	
<div>NOTICE OF DISMISSAL</div> <p>Plaintiff(s) enters a <b>DISMISSAL</b> in the above entitled case (select one)    <input type="checkbox"/> <b>WITH</b>    <input type="checkbox"/> <b>WITHOUT</b> prejudice pursuant to District Court Rules of Civil Procedure, Rule 41(a)(1)(i). This Notice of Dismissal is being filed prior to the Return Hearing and Defendant(s) has not served an Answer or Motion for Summary Judgment on Plaintiff(s).</p> <p>(select one)</p> <div><input type="checkbox"/> Partial Dismissal as to Defendant(s) _____. (Certificate of Service required on other Defendant(s))</div> <div><input type="checkbox"/> <b><i>By signing this document, I/we acknowledge that there are no remaining claims or parties.</i></b></div>	
Date:	<div>Signature of Plaintiff(s)/Plaintiff(s)' Attorney:</div> <div>Print/Type Name:</div>
In accordance with the <b>Americans with Disabilities Act</b> if you require an accommodation for your disability, please contact the District Court Administration Office at PHONE NO. 538-5121, FAX 538-5233, or TTY 539-4853 at least ten (10) working days in advance of your hearing or appointment date. For Civil related matters, please call 538-5151.	