

**NOTICE OF DISMISSAL**

**IN THE DISTRICT COURT OF THE FIFTH CIRCUIT  
STATE OF HAWAII**

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

Disposition/Other

**NOTICE OF DISMISSAL**

Plaintiff(s) enters a **DISMISSAL** in the above entitled case (select one)  **WITH**  **WITHOUT** 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).

(select one)

Partial Dismissal as to Defendant(s) \_\_\_\_\_  
(Certificate of Service required on other Defendant(s))

*By signing this document, I/we acknowledge that there are no remaining claims on parties.*

Signature of Plaintiff(s)/Plaintiff(s)' Attorney:

Date:

Print/Type Name:



In accordance with the **Americans with Disabilities Act** if you require an accommodation for your disability, please contact the District Court Administration Office at PHONE NO. 482-2347, FAX 482-2509, OR TTY 482-2533 at least (10) working days in advance of your hearing or appointment date.