

IN THE ASHLAND MUNICIPAL COURT, ASHLAND, OHIO
SMALL CLAIMS DIVISION

Name

Plaintiff(s)

Case No. _____

-vs-

**NOTICE OF
DISMISSAL**

Name

Defendant(s)

At the request of the plaintiff(s), this action filed in the Small Claims Division of the Ashland Municipal Court, 1209 East Main Street, Ashland, Ohio, 44805, (419) 281-4890, is hereby dismissed at the plaintiff(s)' costs.

Dated this _____ day of _____, 20____.

Plaintiff(s)' Signature(s)

Plaintiff(s)' Name(s) (Please Print)

OR

Attorney Signature

Attorney Name Attorney Reg. #

Street Address

City, State, Zip Code

Phone Number Fax Number

Email Address

CERTIFICATE OF SERVICE

A copy of this Notice of Dismissal was mailed to all parties, or the parties' attorneys of record, at the addresses set forth in the pleadings, on the _____ day of _____, 20____.

Plaintiff(s)' Signature(s)

Plaintiff(s)' Name(s) (Please Print)

OR

Attorney Signature

Attorney Name Attorney Reg. #

Street Address

City, State, Zip Code

Phone Number Fax Number

Email Address