D 5111			
Person Filing:			
Address (if not protected):			
City, State, Zip Code:			
Telephone:			
Email Address:			
Fax:			
LA PAZ COU	NTY JUS	STICE COURT	
PRECINCT 1506 / 1105 W. ARIZONA AVE, PARKER, AZ 85344 PH: (928) 669-2504 / parkerjusticecourt@courts.az.gov / www.lapazcountyjusticecourt.com			
		NOTICE OF VOLUNTARY	
		DISMISSAL (SMALL CLAIMS)	
		(ARSCP 17)	
	vs.		
()		()	
Plaintiff(s) Name / Address / Phone / Email		Defendant(s) Name / Address / Phone / Email	
(The person, business, or entity that is suing)		(The person, business, or entity being sued)	
Please take notice that:			
I am the plaintiff. The defendant(s) has not filed	l a responsi	ve pleading. I voluntarily dismiss my complaint	
against the following defendant(s)			
Date	Signa	nture	

I certify that a copy of this documen [] hand-delivery	t will be provided by
[] first-class mail [] electronic means on	to all other parties to the lawsuit.
Date	Filing Party's Signature

Case Number: