

**IN THE COURT, EIGHTEENTH JUDICIAL CIRCUIT,
BREVARD COUNTY, FLORIDA**

DIVISION:

CASE NUMBER: 05- - -XXXX-XX

PLAINTIFF(S)

CLOCK IN

DEFENDANT(S)

NOTICE OF VOLUNTARY DISMISSAL

Plaintiff(s), _____, give(s) notice
that this action is voluntarily dismissed.

CERTIFICATE OF SERVICE

I certify that a copy of this document was _____ emailed _____ mailed _____ hand-delivered
to the person(s) listed below on the _____ day of _____, 20____.

Defendant(s) or attorney(s) for Defendant(s):

Name(s): _____

Address(es): _____

City, State, Zip: _____

Email address: _____

Date: _____

Signature of Plaintiff(s)

Printed name(s)

Address, City, State, Zip Code

Telephone Number(s)

Email address