Print Form

SC-24

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN MATEO **SMALL CLAIMS DIVISION** 400 County Center Redwood City, CA 94063 (650) 261-5100 option 6	*FOR COURT USE ONLY*
PLAINTIFF/PETITIONER: (Name, address & telephone number for each party) DEFENDANT/RESPONDENT: (Name, address & telephone number for each party)	
REQUEST FOR DISMISSAL (SMALL CLAIMS)	SMALL CLAIMS CASE NUMBER:

If you settle the case before trial, you must file a dismissal with the clerk. **Please file your dismissal at least 3 (three) court days prior to hearing date.**

TO THE CLERK: Please **dismiss** the Claim of **Plaintiff/Petitioner** as follows: (check applicable box)

1. ☐ With prejudice (may not file again)
2. ☐ Without prejudice (may file again)
3. ☐ Partial dismissal (for multiple Defendants/Respondents)
   Dismiss only as to _____
   a) ☐ With prejudice (may not file again)
   b) ☐ Without prejudice (may file again)

Date: _____

_____
(TYPE OR PRINT NAME)

► _____
(SIGNATURE OF PLAINTIFF/PETITIONER)

If a claim of Defendant/Respondent has been filed, the Defendant/Respondent may dismiss their action as follows:

TO THE CLERK: Please **dismiss** the Claim of **Defendant/Respondent** as follows: (check applicable box)

1. ☐ With prejudice (may not file again)
2. ☐ Without prejudice (may file again)
3. ☐ Partial dismissal (for multiple Defendants/Respondents)
   Dismiss only as to _____
   a) ☐ With prejudice (may not file again)
   b) ☐ Without prejudice (may file again)

Date: _____

_____
(TYPE OR PRINT NAME)

► _____
(SIGNATURE OF DEFENDANT/RESPONDENT)
(Required only if a Defendant's Claim has been filed)

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