TO BE FILED IN THE SUPERIOR COURT

APP-005

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (*name*):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	COURT OF APPEAL CASE NUMBER:
ABANDONMENT OF APPEAL (UNLIMITED CIVIL CASE)	SUPERIOR COURT CASE NUMBER:

The undersigned appellant hereby abandons the appeal filed on *(date):* in the above-entitled action.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF APPELLANT OR ATTORNEY)

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