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| ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, state bar number, and address):</i> TELEPHONE NO.: E-MAIL ADDRESS <i>(Optional):</i> ATTORNEY FOR <i>(Name):</i> | FOR COURT USE ONLY |
| SUPERIOR COURT OF SAN LUIS OBISPO COUNTY San Luis Obispo Branch , County Government Center, 1035 Palm Street, Rm 385, San Luis Obispo, CA 93408 Paso Robles Branch , 901 Park Street, Paso Robles, CA 93446 | |
| Plaintiff/Petitioner: Defendant/Respondent: | |
| REQUEST TO WITHDRAW MOTION (Civil & Probate Law and Motion) | CASE NUMBER: |

Per Local Rule 7.07(b) must be filed at least 2 court days prior to hearing.

1. Name of person making this request: _____
2. A hearing is now scheduled for the following motion: _____
3. I am the party who filed the motion on (date): _____
4. The hearing is currently set for (date): _____ Time: _____ Dept. _____
5. No tentative ruling has been posted by the Court and a copy of this Request to Withdraw Motion has been served upon opposing party(ies).
6. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on _____ at (city) _____ California.

SIGNED: _____
ATTORNEY FOR MOVING PARTY OR PARTY WITHOUT ATTORNEY TYPE OR PRINT NAME