	CM-200
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS:	-
MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
	CASE NUMBER:
NOTICE OF SETTLEMENT OF ENTIRE CASE	JUDGE: DEPT.:
NOTICE TO PLAINTIFF OR OTHER PARTY SEEK You must file a request for dismissal of the entire case within 45 days after the date of th unconditional. You must file a dismissal of the entire case within 45 days after the date is conditional. Unless you file a dismissal within the required time or have shown good expired why the case should not be dismissed, the court will dismiss the entire case.	e settlement if the settlement is specified in item 1b below if the settlement
To the court, all parties, and any arbitrator or other court-connected ADR neutral in	volved in this case:
1. This entire case has been settled. The settlement is:	
 a. Unconditional. A request for dismissal will be filed within 45 days after the c Date of settlement: b. Conditional. The settlement agreement conditions dismissal of this matter o 	
specified terms that are not to be performed within 45 days of the date of the be filed no later than (<i>date</i>):	
2. Date initial pleading filed:	
3. Next scheduled hearing or conference:	
a. Purpose:	
b. (1) Date:	
(2) Time:	
(3) Department:	
4. Trial date:	
a. No trial date set.	
b. (1) Date:	
(2) Time:	
(3) Department:	
I declare under penalty of perjury under the laws of the State of California that the foregoir	ng is true and correct.
Date:	
(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)	
	(SIGNATURE)

PROOF OF SERVICE BY FIRST-CLASS MAIL

NOTICE OF SETTLEMENT OF ENTIRE CASE

(NOTE: You cannot serve the Notice of Settlement of Entire Case if you are a party in the action. The person who served the notice must complete this proof of service.)

- 1. I am at least 18 years old and **not a party to this action.** I am a resident of or employed in the county where the mailing took place, and my residence or business address is (*specify*):
- 2. I served a copy of the *Notice of Settlement of Entire Case* by enclosing it in a sealed envelope with postage fully prepaid and *(check one):*
 - a. deposited the sealed envelope with the United States Postal Service.
 - b. placed the sealed envelope for collection and processing for mailing, following this business's usual practices, with which I am readily familiar. On the same day correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service.
- 3. The Notice of Settlement of Entire Case was mailed:
 - a. on (date):

..

b. from (city and state):

.

4. The envelope was addressed and mailed as follows:

a.	Name of person served:	C.	Name of person served:
	Street address:		Street address:
	City:		City:
	State and zip code:		State and zip code:
b.	Name of person served:	d.	Name of person served:
	Street address:		Street address:
	City:		City:
	State and zip code:		State and zip code:

Names and addresses of additional persons served are attached. (You may use form POS-030(P).)

5. Number of pages attached

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME OF DECLARANT)

(SIGNATURE OF DECLARANT)

CM-200 [Rev. January 1, 2007]

NOTICE OF SETTLEMENT OF ENTIRE CASE

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