

SMALL CLAIMS CASE NO.:

PLAINTIFF/DEMANDANTE (Name, street address, and telephone number of each):

DEFENDANT/DEMANDADO (Name, street address, and telephone number of each):

Telephone No.:

Telephone No.:

Telephone No.:

Telephone No.:

See attached sheet for additional plaintiffs and defendants.

NOTICE TO (Name):

One of the parties has asked the court to CANCEL the small claims judgment in your case. If you disagree with this request, you should appear in this court on the hearing date shown below. If the request is granted, ANOTHER TRIAL may immediately be held. Bring all witnesses, books, receipts, and other papers or things with you to support your case.

NOTICE OF MOTION TO VACATE (CANCEL) JUDGMENT

1. A hearing will be held in this court at which I will ask the court to cancel the judgment entered against me in this case. If you wish to oppose the motion you should appear at the court on

Table with 5 columns: HEARING DATE, DATE, DAY, TIME, PLACE, COURT USE. Includes a row for FECHA DEL JUICIO.

2. I am asking the court to cancel the judgment for the reasons stated in item 5 below. My request is based on this notice of motion and declaration, the records on file with the court, and any evidence that may be presented at the hearing.

DECLARATION FOR MOTION TO VACATE (CANCEL) JUDGMENT

- 3. Judgment was entered against me in this case on (date):
4. I first learned of the entry of judgment against me on (date):
5. I am asking the court to cancel the judgment for the following reason:
a. I did not appear at the trial of this claim because (specify facts):
b. Other (specify facts):
6. I understand that I must bring with me to the hearing on this motion all witnesses, books, receipts, and other papers or things to support my case.

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) (SIGNATURE)

CLERK'S CERTIFICATE OF MAILING

I certify that I am not a party to this action. This Notice of Motion to Vacate Judgment and Declaration was mailed first class, postage prepaid, in a sealed envelope to the responding party at the address shown above. The mailing and this certification occurred at (place), California, on (date): Clerk, by \_\_\_\_\_, Deputy

- The county provides small claims advisor services free of charge. -