

COMMONWEALTH OF MASSACHUSETTS
THE TRIAL COURT
BOSTON MUNICIPAL COURT DEPARTMENT

_____ Division

Docket No. _____

Notice of Withdrawal of Limited Appearance

_____, Plaintiff/Petitioner

v.

_____, Defendant/Respondent

On a Complaint for _____ filed _____
Please enter my Withdrawal of Limited Appearance as attorney for
_____, the Plaintiff/Petitioner/Defendant/Respondent in
the above action. I certify that I have this day served notice of this Withdrawal of
Limited Appearance on all counsel and all parties not represented by counsel.

Signature of Attorney

Type/Print Name of Attorney

Attorney Street Address

Attorney Telephone Number

City, State, Zip Code

Attorney BBO No.

Date

To the Party: If your address and/or telephone number
has been IMPOUNDED, DO NOT provide it/them below.
Instead, write IMPOUNDED on the address line below.

Signature of Party

Type/Print Name of Party

Party Street Address (for purpose of service)

Party Telephone Number

City, State, Zip Code

Date