



**MASSACHUSETTS
TRIAL COURT**

**MOTION TO WITHDRAW
COMPLAINT TO FORECLOSE
RIGHTS OF REDEMPTION**

COURT USE ONLY

COURT DEPARTMENT

LAND COURT

COUNTY

DOCKET NUMBER

CASE NAME

Plaintiff moves to withdraw the Complaint to Foreclose Rights of Redemption that was previously filed in this matter.

NAME (ATTORNEY OR PARTY(S))

B.B.O. NUMBER (IF APPLICABLE)

FIRM OR AGENCY NAME (IF APPLICABLE)

OFFICE OR HOME PHONE NUMBER

STREET ADDRESS

APT/UNIT #

CELL PHONE NUMBER

CITY/TOWN

STATE

ZIP CODE

E-MAIL ADDRESS

DATE

SIGNATURE



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CERTIFICATE OF SERVICE

I hereby certify that I have served the attached Motion to Withdraw Complaint to Foreclose Rights of Redemption by first class mail, postage prepaid and/or e-mail, to the following person(s) and address(es):

(Enter name, address, and/or e-mail address below for each person served.)

DATE

SIGNATURE