

**IN THE COURT OF APPEALS
FIRST APPELLATE DISTRICT OF OHIO
HAMILTON COUNTY, OHIO**

_____ APPEAL NO. _____
Appell_____ TRIAL NO. _____

vs

**MOTION FOR VOLUNTARY
DISMISSAL**

Appell_____

Now comes Appellant_____ pursuant to App. R. 28
requests this court dismiss the instant appeal.

(First and Last Name)

(Address)

(City, State, Zip Code)

*(Email Address **and** Telephone Number)*

(Signature)

CERTIFICATE OF SERVICE

I certify that a copy of this motion was served upon: _____

on _____ in the following manner: _____

(Signature)