Name and Address of C	Jourt:				SC-13
				SMALL CLAIMS CASE NO.:	
PLAINTIFF/DEMANDAI	NTE (Name, street address, and tek	ephone number	of each):	DEFENDANT/DEMANDADO (Name, street address, and telephone number of	each):
Telephone No.:			\dashv	Telephone No.:	_
Telephone No.: See attack	hed sheet for additional	plaintiffs ar	l nd defendants	Telephone No.:	
NOTICE TO (N	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.				Una de las partes en el caso le ha solicitado a la corte que DEJE SIN EFECTO la decisión tomada en su caso por la corte para reclamos judiciales menores. Si usted esta en desacuerdo con esta solicitud, debe presentarse en esta corte en la fecha de la audiencia indicada a continuación. Si se concede esta solicitud, es posible que se efec- túe otro juicio inmediatamente. Traiga a todos sus testigos, libros, recibos, y otros documentos o cosas para presentarlos en apoyo de su caso.	
_		which I will	ask the cour	ACATE (CANCEL) JUDGMENT It to cancel the judgment entered against me in this case. Burt on	
HEARING DATE	DATE	DAY	TIME	PLACE	COURT USE
FECHA	1. 2.				
JUICIO	3.				
 and declara Judgment w I first learne I am asking I c I o b.	tion, the records on file of DECL vas entered against me is d of the entry of judgme the court to cancel the judid not appear at the trial ther (specify facts): d that I must bring with ne.	with the con ARATION In this case In this case In against rudgment for I of this cla	urt, and any e FOR MOTIO on (date): me on (date): or the followin im because (date):	g reason:	
	(TYPE OR PRINT NAME			(OLONATURE)	

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 _

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

Deputy