To be inserted by Court			
Case Number:			
Date Filed:			
FDN:			
CONSENT TO DISCONTINUANCE			
SUPREME/DISTRICT/MAGI COURT OF APPEAL] If applicab CIVIL JURISDICTION MINOR CIVIL] If applicable NAME OF LIST] LIST If applicab		AUSTRALIA	
Please specify the Full Name including capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number if more than one party of the same type.			
First Applicant			
First Respondent			
First Interested Party			
Lodging Party			
Name of law firm / solicitor	Full Name (including Also Known as, capacity (eg Administrator, Li	quidator, Trustee) and Litigation Guardian Name (if applicable))  Solicitor	
Consent to Discontinuance Mark appropriate sections below with an 'x'  The following reporting With the Ports title and represent a section and the section an			
The following parties [list the Party title and names of each consenting party]  consent to discontinuance of the following proceeding brought by the [role of party & name]:			
Type of proceeding:  [ ] Claim.  [ ] Originating Application  [ ] Counterclaim.  [ ] Third Party Claim.  [ ] Contribution Notice.  [ ] Appeal.  [ ] Cross Appeal.  [ ] Notice of Alternative Claim.	n.		

nature of [ ] solicitor [ ] party	
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