**NOTICE OF DISCONTINUANCE OF APPEAL**

[*SUPREME/YOUTH*] **Select one** COURT OF SOUTH AUSTRALIA

COURT OF APPEAL **Select** **only if applicable**

CRIMINAL JURISDICTION

**[*FULL NAME*]**

**Appellant**

**v**

**[*FULL NAME*]**

**Respondent**

|  |  |  |
| --- | --- | --- |
| **Lodging party** |  |  |
|  | **Party title** | **Full Name of party** |
| Name of law firm/office |  |  |
| **If applicable** | **Law firm/office** | **Responsible Solicitor** |
| Name of authorised officer |  |
| **If body corporate and no law firm/office** | **Full Name** |

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| **Discontinuance**The Appellant wholly discontinues the Appeal. |

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| **Service**The party filing this document is required to serve it on all other parties in accordance with the Rules of Court. |