

[CAPTION]

NOTIFICATION CERTIFICATE

The undersigned _____ hereby certifies as follows:

1. The undersigned intends to withdraw as attorney of record for _____.
2. The undersigned has complied with notification requirements of Rule 4.3 of the Uniform Superior Court Rules of Georgia by U.S. Mail to the client's last known address:

(Name and address of client)

The last known telephone number of the client is _____.

SO CERTIFIED this _____ day of _____, 20_____.

(Name of Attorney)
Attorney for (Defendant) (Plaintiff)
Georgia Bar No. _____
(Address)