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7 **IN THE SUPERIOR COURT OF WASHINGTON**
8 **IN AND FOR PACIFIC COUNTY**

9 STATE OF WASHINGTON,

10 Plaintiff,

11 vs.

No. _____

12 **PROTECTED PERSON'S REQUEST TO**
13 **REMOVE A DOMESTIC VIOLENCE NO**
14 **CONTACT ORDER**

15 Defendant.

16 I, _____ and the person protected by a Sexual
17 Assault or Domestic Violence Protection Order entered against above Defendant. I
18 request that the Court [] modify or [] rescind/remove the Domestic Violence No-
19 Contact Order because:

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I have also attached the original letter provided to me by Crisis Support Network (CSN) which demonstrates that I have completed the Pacific County Domestic Violence Outreach course. I have also provided a copy of this Petition and the Note for Motion to the Prosecuting Authority with at least five-days of notice (excluding weekends and holidays). I also understand the consequences of my request and am doing so without threat from any person, including the Defendant named herein.

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signed at _____ in _____ on _____.
(city) (state) (date)

Signature of Protected Person

Type or Print Name