

TO PETITIONER AND RESPONDENT: NOTICE OF HEARING

The Court has scheduled a hearing as follows:

Date: _____ Time: _____ Courtroom: _____

(To Be Completed by Court Staff Only)

IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF _____

Petitioner (full name of person who asked for restraining order))
See CIF (date of birth)) Case No. _____

v.

Respondent (full name of person restrained))
See CIF (date of birth))

**ORDER TO SHOW CAUSE
RE: MODIFYING RESTRAINING ORDER**
(Family Abuse Prevention Act)

NOTICE
READ THESE PAPERS CAREFULLY

IF YOU FAIL TO APPEAR AT THE SCHEDULED HEARING, THE COURT MAY GRANT THE RELIEF REQUESTED. IF YOU HAVE ANY QUESTIONS, YOU SHOULD SEE AN ATTORNEY IMMEDIATELY

ORDER

TO: _____, Petitioner Respondent:

IT IS HEREBY ORDERED:

A. PERSONAL APPEARANCE

You must appear in person before the court, on the date and time listed on the top center of the first page of this document, to show cause why an order should not be entered modifying the Restraining Order previously entered in this matter on _____ (date original order was issued), and granting the relief requested in the attached motion.

B. WRITTEN RESPONSE

You must appear by written response within thirty (30) days after this order was served on you, to show cause why an order should not be entered granting the relief requested in this Motion.

C. MOTION DENIED _____

Dated: _____

JUDGE (Signature)

Print, Type or Stamp Name of Judge

Certificate of Document Preparation and Readiness for Judicial Signature. You are required to truthfully complete this certificate regarding the document you are filing with the court. Check all boxes and complete all blanks that apply:

I selected this document for myself and I completed it without paid assistance.

I paid or will pay money to _____ for assistance in preparing this form.

This proposed order is ready for judicial signature under UTCR 5.100 because this order is submitted ex parte as allowed by statute or rule.

Dated: _____ Submitted by (signature): _____

Print Name, Petitioner Attorney for Petitioner

OSB No. (*if applicable*)

Address or Contact Address
Use a **Safe** Contact address

City, State, Zip

Telephone or Contact Telephone Number
Use a **Safe** Contact number