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DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Petitioner Respondent, Signature

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**ORDER**

- Allowed.
  - Denied.
  - Fees and costs for change of venue to be paid by  Petitioner  Respondent  Other: \_\_\_\_\_
- \_\_\_\_\_.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Circuit Court Judge

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
 Petitioner  Respondent, Print Name

\_\_\_\_\_  
Address or Contact Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone or Contact Telephone

**I certify that this is a true copy.**

\_\_\_\_\_  
 Petitioner  Respondent, Signature