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

_____	)	Case No. _____
☐ Petitioner	)	
☐ Petitioner-Parent/Guardian of Minor Child	)	
☐ _____	)	
(Name of Protected Minor Child)	)	
(full names)	)	
v.	)	**PETITIONER'S MOTION AND**
	)	**AFFIDAVIT FOR TERMINATION**
	)	(Sexual Abuse Protective Order)
_____	)	
Respondent	)	
(full name of person to be restrained)	)	

MOTION AND AFFIDAVIT

Petitioner, _____, being first duly sworn, moves this court for an order allowing the voluntary withdrawal and termination of the Sexual Abuse Protective Order on file herein for the following reasons:

_____

_____

_____

_____

_____

STATEMENT OF POINTS AND AUTHORITIES

ORS ___ authorizes the court to terminate a Sexual Abuse Protective Order upon the request of the Petitioner.

_____

Signature of Petitioner **Print or type name of Petitioner**

STATE OF OREGON)
)
County of _____)

This instrument was acknowledged before me this_____ day of _____, 20___ by

_____

(*Print Name of Petitioner*)

_____

NOTARY PUBLIC FOR OREGON/COURT CLERK
My commission expires: _____

Certificate of Document Preparation. 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.

Submitted by:

Print Name, ☐ Petitioner ☐ Attorney for Petitioner ☐ OSB No. (*if applicable)*

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