

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

Petitioner

Case No: _____

(Parent/Guardian of Minor Petitioner)
(use full names)

**PETITIONER'S MOTION AND
AFFIDAVIT FOR TERMINATION**

(Sexual Abuse Protective Order)

v.

Respondent
(full name of person restrained)

MOTION AND AFFIDAVIT

Petitioner, _____, being first duly sworn, moves this court for an order terminating the Sexual Abuse Protective Order because:

STATEMENT OF POINTS AND AUTHORITIES

ORS 163.775 authorizes the court to terminate a Sexual Abuse Protective Order upon the request of the Petitioner.

Submitted by: Petitioner Parent or Guardian of Minor Petitioner Attorney for Petitioner

Date

Signature

OSB# (attorneys only)

Name (printed)

Contact Address (use a SAFE address) City, State, ZIP

Contact Phone (use a SAFE number)

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: _____