## IN THE CIRCUIT COURT OF THE STATE OF OREGON COUNTY OF \_\_\_\_\_

	See CIF	)	Case No
Petitioner (your name)	(date of birth)	)	
V.		))))))	<b>PETITIONER'S MOTION AND AFFIDAVIT FOR DISMISSAL AND ORDER</b> (Family Abuse Prevention Act)
	See CIF	)	
Respondent	(date of birth)	)	
(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 dismissal of the Restraining Order on file herein for the following reasons:

## STATEMENT OF POINTS AND AUTHORITIES

ORS 107.720(2) authorizes the court to terminate a Family Abuse Prevention Act Restraining 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	t Name of Petitioner)
	NOTARY PUBLIC FOR OREGON/COURT CLERK
	My commission expires:

**PETITIONER'S MOTION AND AFFIDAVIT AND ORDER OF DISMISSAL - Page 1 of 2** (FAPA 3/10)

## **ORDER**

$\Box$ Motion Granted $\Box$ Motion Denied $\Box$ Other:	
IT IS SO ORDERED this day of	, 20
	JUDGE (Signature)
	Print, Type or Stamp Name of Judge
<b>Certificate of Document Preparation.</b> You are redocument you are filing with the court. Check all b	quired to truthfully complete this certificate regarding the oxes and complete all blanks that apply:
$\Box$ I selected this document for myself and I com $\Box$ I paid or will pay money to	
Submitted by:	
Print Name,  Petitioner  Attorney for Petitione	er $\Box$ OSB No. ( <i>if applicable</i> )

Address or Contact Address Use a Safe Contact address City, State, Zip

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