

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

\_\_\_\_\_) Case No. \_\_\_\_\_  
Petitioner (your full name), )  
)  
)  
) PETITIONER'S MOTION AND AFFIDAVIT FOR  
) DISMISSAL AND ORDER  
) (Family Abuse Prevention Act)  
)  
)  
\_\_\_\_\_)  
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 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 Name of Petitioner)*

\_\_\_\_\_  
NOTARY PUBLIC FOR OREGON/COURT CLERK  
My commission expires: \_\_\_\_\_

**ORDER**

Motion Granted  Motion Denied  Other: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IT IS SO ORDERED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
JUDGE (Signature)

\_\_\_\_\_  
Print, Type or Stamp Name of Judge

**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*)

\_\_\_\_\_  
Address or Contact Address                      City, State, Zip                      Telephone or Contact Telephone Number