

**SPOKANE COUNTY DISTRICT COURT
STATE OF WASHINGTON**

Case Number: _____

Petitioner(s) (persons protected), (DOB) _____

vs.

Respondent (person restrained) (DOB) _____

**MOTION TO
MODIFY/TERMINATE/REALIGN**

- Anti-Harassment
- Domestic Violence
- Sexual Assault
- Stalking

Protection Order

Public Safety Building 2nd Floor
1100 W. Mallon, Spokane WA 99210-2352

- I am the Petitioner.
- I am the Respondent.

I request that the court modify terminate re-align the parties for the:

- Temporary Order for Protection, filed on _____ (date).
- Final Order for Protection, filed on _____ (date), which expires on _____ (date).
- _____, filed on _____ (date).

The order referenced above should be terminated **because:** _____

The order referenced above should be modified **as follows:**

The order referenced above should re-align the parties **as follows**:

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Dated: _____

Signature of Moving Party

**This document must be served on the other party, and
proof of service must be in the court file prior to the hearing.**