|  |  |
| --- | --- |
| ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)*:          TELEPHONE NO.:       FAX NO.:  E-MAIL ADDRESS:  ATTORNEY FOR (Name): | *FOR COURT USE ONLY* |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF MADERA 200 South G Street  Madera, CA 93637 Criminal Division |
| PEOPLE OF THE STATE OF CALIFORNIA  vs.   |  |  | | --- | --- | | DEFENDANT: |  | |
| **APPLICATION FOR ORDER TO MODIFY AND/OR TERMINATE CRIMINAL PROTECTIVE ORDER** | CASE NUMBER: |

I  Protected Person  Defendant apply for an order:

to terminate Criminal Protective Order.

to modify Criminal Protective Order.

Reasons: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date: | |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  | Print Name |  | Signature |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***(FOR COURT USE ONLY)*** | | | | | | | | | | |
| Judge: |  | |  | | |  |  |  | | |
| Schedule For Hearing: | | | Yes  No | | |  |  |  | | |
| Hearing Date: | |  | | Time: |  | | | Dept. : |  |  |
| Additional Information: | | |  | | | | | | | |
|  | | | | | | | | | | |