

Clerk stamps date here when form is filed.

(1) Party Seeking Modification/Termination

a. Your Full Name: _____

b. Protected person Restrained personc. Your Lawyer (*if you have one for this case*)

Name: _____ State Bar No.: _____

Firm Name: _____

d. Your Address (*If you have a lawyer, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, you may give a different mailing address instead. You do not have to give telephone, fax, or e-mail.*)

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-Mail Address: _____

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

(2) Other Party

a. Full Name: _____

b. Address (*if known*): _____

City: _____ State: _____ Zip: _____

(3) Current Order

a. The current order is a/an:

 Civil Harassment Restraining Order After Hearing (form CH-130) Order Renewing Civil Harassment Restraining Order (form CH-730)

b. The current order expires on (date): _____

c. A copy of the current order is attached.(4) Request to Modify Restraining Ordera. I ask the court to modify the current order as follows (*specify requested changes referring to the item number in order that you want to change or delete*): Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 4a—Requested Changes" for a title. You may use form MC-025, Attachment.



- b. I ask the court to modify the order because (*explain below*):

Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 4b —Reasons for Requested Changes" for a title. You may use form MC-025, Attachment.

5 Request to Terminate Restraining Order

I ask the court to terminate the current order because (*give reasons below*):

Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 5—Reasons to Terminate Order" for a title. You may use form MC-025, Attachment.

6 **Lawyer's Fees and Costs**

I ask the court to order payment of my: a. Lawyer's fees b. Court costs

The amounts requested are:

Item	Amount	Item	Amount
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Check here if there are more items. Put the items and amounts on the attached sheet of paper or form MC-025 and write "Attachment 6—Lawyer's Fees and Costs" for a title.

Date: _____

Lawyer's name (if any)

► _____
Lawyer's signature

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: _____

Type or print your name

► _____
Sign your name