

PROTECTED PARTY'S NAME AND ADDRESS: TELEPHONE NO.	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF EL DORADO STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE:	
PEOPLE OF THE STATE OF CALIFORNIA VS. DEFENDANT'S NAME:	CASE NUMBER:

REQUEST TO TERMINATE/MODIFY CRIMINAL PROTECTIVE ORDER

The Court may decline to calendar this request if the protective order was part of a negotiated plea or sentencing and was to remain in effect for a specified period of time.

I, _____ (protected party) in the above-entitled case request that a hearing date be set for the Court to terminate or modify the criminal protective order(s) issued by this court on _____.

Reason: _____

Date: _____ Signature of Protected Party: _____

FOR COURT USE ONLY:	
<input type="checkbox"/> Court approves calendar request.	
<input type="checkbox"/> Court denies calendar request.	
Date: _____	Signature of Judicial Officer: _____

<u>HEARING DATE SET FOR:</u>		
Date: _____	Time: _____	Department: _____
Protected Party and defendant are required to appear. Failure to appear will result in the matter being dropped from the calendar. Defense Counsel to notify defendant of hearing date.		

cc: District Attorney
 cc: Protected Person
 cc: Defense Counsel: _____
 cc: Defendant (if no Defense Counsel previously)