ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, state bar number, and address):* Telephone No: Fax No:	*FOR COURT USE ONLY*
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE	
PROTECTED PARTY: RESTRAINED PARTY:	CASE NUMBER:

DECLARATION RE: REQUEST TO DISMISS DOMESTIC VIOLENCE RESTRAINING ORDER

The above-mentioned ☐ Protected Party ☐ Restrained Party has requested that the Domestic Violence Restraining Order granted on _____ be dismissed for the following reason(s):

_____
_____
_____
_____
_____
_____
_____
_____

I declare under penalty of perjury under the laws of the state of California that the foregoing is true and correct:

Date: _____

_____ _____
(Type or Print Name) (Signature of the Petitioner/Respondent)

☐ Verification of Identification of the ☐ Protected Party ☐ Restrained Party _____
Clerk

The court makes the following orders:

☐ Request for Dismissal Granted

☐ Set for Hearing _____
Date/Time

Date:_____ _____
Judicial Officer