

Municipal Court of Washington, City of Centralia, County of Lewis

City of Centralia, _____
Plaintiff
vs.

Defendant (First, Middle, Last Name, DOB)

No. _____
**Protected Person's Motion to Modify or
Cancel Domestic Violence No-Contact
Order**
(MT)
(Clerk's Action Required)

**Protected Person's Motion to Modify or Cancel
Domestic Violence No-Contact Order**

I, (name) _____, am the
person protected in a *Domestic Violence No-Contact Order* that the court issued against the
defendant. I request that the court enter an order to [] modify (change) [] cancel the *Domestic
Violence No-Contact Order* signed on (date) _____.

The court should modify or cancel the order referenced above **because**:

The court should modify the terms and conditions of the order referenced above, **as follows**:

I understand that if the court grants my motion to modify, the court will issue a new *Domestic
Violence No-Contact Order* that will replace the order I want to modify. I certify, under penalty of
perjury under the laws of the State of Washington, that the foregoing is true and correct.

Signed at (city) _____ in (state) _____ on (date) _____

Signature of Protected Person

Type or Print Name