

Court of Washington, County/City of _____

华盛顿州 县/市法院

Plaintiff

原告

vs.

诉

Defendant (First, Middle, Last Name, DOB)

被告 (名字、中间名、姓氏、出生日期)

No.: _____

编号: _____

Order re Motion to Modify/ Rescind
No-Contact Order

关于请求修改/撤销禁止接触令的命令

☐ Denied (ORDYMT)

未获批准(ORDYMT)

☐ Granted (ORGMT)

获得批准(ORGMT)

(Clerk's action required)

(书记员需要采取的行动)

The court received (*name of protected person*) _____'s
motion to ☐ modify ☐ rescind the No-Contact Order signed on (*date*) _____

法院已收到 (受保护人姓名) _____ 的请求, 申请[-]修改[-]撤销于以下日期签署的禁止接触令
(日期)

Based upon the motion, declarations, and testimony, if any, and the relevant court records, the
court:

根据请求、声明和证词 (如有) 以及相关法庭记录, 法院:

☐ **denies** the motion.

拒绝了该请求。

☐ **grants** the motion, and

批准了请求, 并且

☐ **replaces** the order referenced above with a new No-Contact Order, filed separately.

用单独提交的新禁止接触令取代了上述命令。

☐ **rescinds** the No-Contact Order referenced above.

撤销了上面提到的禁止接触令。

The clerk of court shall forward a copy of this order that rescinds on or before the next judicial
day to: ☐ _____ County Sheriff's Office/
Police Department **where the case is filed** which shall enter it in a computer-based criminal
intelligence system available in this state used by law enforcement to list outstanding warrants.

法庭书记员应在下一个司法日或之前将本撤销命令的副本转发至： [-] 县治安官办公室
/立案地警察局，该警察局应将相关信息录入本州执法部门用于记录未决逮捕令的计算机刑事情报系统。

Dated: _____
日期:

Judge/Pro Tem/Court Commissioner
法官/临时法官/助理法官

I acknowledge receipt of a copy of this Order:
我确认收到此命令的副本:

I acknowledge receipt of a copy of this Order:
我确认收到此命令的副本:

Protected Person
受保护人

Defendant
被告

Type or Print Name
键入或工整填写姓名

Type or Print Name
键入或工整填写姓名