

\_\_\_\_\_  
Full Name of Party Filing Document

\_\_\_\_\_  
Mailing Address (Street or Post Office Box)

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Telephone

IN THE DISTRICT COURT FOR THE \_\_\_\_\_ JUDICIAL DISTRICT  
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF \_\_\_\_\_

STATE OF IDAHO,  
Plaintiff,  
vs.  
\_\_\_\_\_  
Defendant.

Case No. \_\_\_\_\_

REQUEST TO MODIFY OR DISMISS  
NO CONTACT ORDER  
I.C.R. 46.2(b)

1.  I am a person protected by a no-contact order in this case.  
 I am the parent or guardian of a person protected by a No Contact Order in this case.
2. I ask that the No Contact Order issued against the defendant in this case be:

Terminated because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Changed because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The changes I want are: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. It is my own choice to make this request.
4. I understand that, if the court changes or dismisses the No Contact Order in this criminal case, it does not mean the criminal case against the defendant will be dismissed.
5. I also understand that dismissal of the No Contact Order in this criminal case would not change any civil Domestic Violence Protection Order.

Date: \_\_\_\_\_

\_\_\_\_\_  
Typed/printed

\_\_\_\_\_  
Signature