

SUPERIOR COURT OF ARIZONA - MOHAVE COUNTY

401 E SPRING ST/P.O. BOX 7000 KINGMAN AZ 86401 (928)753-0713
 2225 TRANE RD BULLHEAD CITY AZ 86442 (928)758-0730
 2001 COLLEGE DR LAKE HAVASU CITY AZ 86403 (928)453-0701

FOR CLERK'S USE ONLY

NCIC# _____ DPS# _____

Plaintiff Name v. Defendant Name	Case No.	<p style="text-align: center;">REQUEST:</p> <input type="checkbox"/> HEARING <input type="checkbox"/> DISMISS ORDER <input type="checkbox"/> CANCEL HEARING AND ORDER OP/ IAH/ IAWH Issue Date: _____
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- Defendant requests:
- a hearing.
 - that the Court cancel the hearing requested by the defendant in this case.
 - that the Court continue the scheduled hearing on _____(Date).

If the Plaintiff is:

- a current or former spouse, or
- someone with whom you live/lived, or
- the child of an intimate partner, or
- a parent of your child

AND the Order remains in effect or is changed after the hearing,

You will be prohibited from possessing or purchasing firearms or ammunition until the Order expires one year after the service of the original Order.

By making this request, if you fail to appear for the hearing, the prohibition against you possessing or purchasing firearms or ammunition will apply.

- Plaintiff requests:
- the protective order listed above be dismissed.
 - that the Court cancel the hearing set prior to the issuance of the protective order in this case.
 - that the Court continue the scheduled hearing on _____(Date).

List the reasons for your request:

_____ Date

_____ Requesting Person's Signature

_____ Address and telephone number if Defendant is the requesting party.

CERTIFICATE OF TRANSMITTAL

Copy mailed/delivered to Plaintiff Defendant on _____ by _____