

**Municipal Court of Washington  
For Olympia**

**City of Olympia Domestic Violence  
Case Number: \_\_\_\_\_**

City of Olympia,  
**vs.**

**Protected Person's Statement  
regarding the above Domestic  
Violence No Contact Order**

**Defendant** (First, Middle, Last Name, DOB) \_\_\_\_\_

I, \_\_\_\_\_ (name), am the person protected in the Domestic Violence No Contact Order that the Olympia Municipal Court issued in the above case against the defendant. I request that the Olympia Municipal Court do one of the following:

- Do not issue a Domestic Violence No Contact Order.
- Remove the Domestic Violence No Contact Order.
- Keep the No Contact Order but allow exceptions (i.e., phone contact/text/email/third party/other exception).

The court should modify/rescind the order referenced above because:

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I understand that this statement will be provided to the Olympia Municipal Court, Olympia Prosecutor's Office as well as the defendant and/or Defense Attorney. I understand that I can contact the Victim Assistance Coordinator at (360) 753-8408 to see if a hearing has been set regarding the modification/recall of the No Contact Order. 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

Protected Person's Phone Number (if confidential, please consider providing a safe contact or message number): \_\_\_\_\_

Address of Protected Person (if confidential, please consider giving a safe mailing address):  
\_\_\_\_\_