ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, Address, and Telephone No.):			FOR COURT USE ONLY		
-	ATTORNEY FOR:				
SUPERIOR COURT OF CALIFORNIA, COUNTY OF KINGS Street Address: 1640 Kings County Drive Mailing Address: City and Zip Code: Hanford, CA 93230					
PR	OTECTED PARTY:			İ	
 	STRAINED PARTY::				
KL	STIPULATION AND ORDER TO VACATE TEMPORARY RESTRAINING ORDER	<u> </u>	CASE NUMBER:		
1.	Name of Protected Person:				
2.	Name of Restrained Person:				
3.	3. The Temporary Restraining Order was filed on and terminates on				
4.	We ask the Court to vacate the TEMPORARY RESTRAINING ORDER issued on behalf of Protected Party in				
	its entirety and we understand this means the additional protected parties will no longer be protected.				
5.	5. We ask the Court to vacate the restraining order indicated above for the following reasons:				
FOR	PROTECTED PARTY ONLY:	FOR BOTH	PARTIES:		
I make this request of my own free will and have not been coerced or threatened in any way by the restrained person or anyone else to make this request.		We both stipulate to the foregoing.			
		Date:		_	
I declare under penalty of perjury under the laws of the					
State of California that the foregoing is true and correct.		Name of Prote	ected Party	Signature of Protected Party	
	Signature of Protected Party	Name of Rest	rained Party	Signature of Restrained Part	
	·				
ORDER					
Bas	ed on stipulation, IT IS HEREBY ORDERED:				
	The request is GRANTED . The Temporary Res	straining Orde	ar filed on hel	half of the protected party	
	on is hereby vacated in its	•			
	this order and enter it into CCPOR.	·			
The request is DENIED . The Temporary Restraining Order shall remain in full force and effect.					
	Both Parties are ordered to appear on	at	in D	ept of this court.	
DAT	DATED:				