

STATE OF GEORGIA
COUNTY OF MUSCOGEE

DEFENDANT _____ CASE NO. SC ___ CR _____

AFFIDAVIT TO RESCIND NO CONTACT OR STAY AWAY ORDER

Personally appeared before me the undersigned officer duly authorized to administer oaths,
(name of individual seeking to lift No Contact Order) _____,

I have personally examined the identification presented by this individual,
(This document will be a public record. Do not write entire Social Security Number)

- driver's license
- passport
- military ID
- other _____

who after being duly sworn, deposes and states as follows:

I am the alleged victim in the case listed above, I am aware that a court of competent jurisdiction issued a special condition of bond or probation that the Defendant have no contact with me and or my immediate family and that such order was issued for my safety and the safety of my immediate family and household members. I hereby state that I desire to have contact with the Defendant and I do not believe the defendant poses any danger or threat of injury, maltreatment, harassment, or harm to myself or any member of my family or household.

Therefore, I request this court to rescind the special condition of bond or probation the "NO CONTACT" or STAY AWAY ORDER issued in this case. I make this request freely and voluntarily and I have not been unduly influenced, threatened, or coerced in any manner whatsoever by the Defendant or anyone on the Defendant's behalf.

I give this affidavit for the purpose of removing the No Contact Order currently in place to protect me from the above-named Defendant and further affiant sayeth not

(signature of affiant)

SUBSCRIBED and SWORN to before
me this _____ day of _____, 20 _____.

(Notary Public)
My Commission Expires: _____