
add another page if necessary

Signature of Respondent

Date

Print Name of Respondent

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on _____ a copy of this Request to
date

Terminate a One-Year Extreme Risk Firearm Protection Order was served on

Petitioner by _____ at _____
enter service method (U.S. Mail, personal service, etc.) street address

_____, _____
city state zip

Petitioner's Attorney by _____ at _____
enter service method (U.S. Mail, personal service, etc.) street address

_____, _____
city state zip

Signature of Respondent

[Adopted by Supreme Court Order No. S-1-RCR-2024-00097, effective for all cases filed on or after December 31, 2025.]