LOUISIANA UNIFORM ABUSE PREVENTION ORDER

COURT NAME AND PARISH/CITY:	DOCKET No._____ DIV. _____ FILED: _____ CLERK: _____

ORDER TO DISSOLVE

☐ **BAIL RESTRICTIONS** ☐ **PROBATION CONDITIONS** ☐ **SENTENCING ORDERS** ☐ **CONDITIONS OF PAROLE**

STATE OF LOUISIANA
V.

OR

CITY OF_____
V.

DEFENDANT'S NAME: _____
Alias: _____ Date of Birth:_____ Sex: ☐ F ☐ M Race: _____

Address:_____
No. & Street *Apt. No.* *City* *State* *Zip Code*

Social Security #: _____ Dr. Lic. # _____ State ____ Exp. Date _____

ORDER

IT IS HEREBY ORDERED THAT THE Louisiana Uniform Abuse Prevention Order in the form of an Order for:

☐ Bail Restrictions ☐ Probation Conditions ☐ Sentencing Orders ☐ Conditions of Parole

issued in the above-captioned and numbered matter on _____ *(month/day/year)*, for protected person _____ *(name),* be and the same is hereby **dissolved**.

Date of Order	**JUDGE / MAGISTRATE / COMMISSIONER:**
_____ *month/day/year*	_____ **SIGNATURE** _____ **PRINT OR STAMP NAME**

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FAXED OR ELECTRONICALLY TRANSMITTED TO LOUISIANA PROTECTIVE ORDER REGISTRY

DATE _____ CLERK _____

FAX COMPLETED ORDERS FAXED TO 888-568-4558 or EMAILED TO lpororders@lasc.org

Copies to: 1) Court file 2) Protected Person 3) Defendant 4) Reporting/Investigating Law Enforcement Agency 5) Prosecuting Attorney 6) Chief Law Enforcement Officer in the parish where the protected person(s) resides 7) La. Dept. of Public Safety & Corrections (DPS&C) 8) Committee on Parole, La. DPS&C 9) Louisiana Protective Order Registry