

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
OF THE STATE OF FLORIDA IN AND FOR PASCO COUNTY**

**STATE OF FLORIDA**

**CASE NO(S):** \_\_\_\_\_

**vs.**

\_\_\_\_\_

**SPN:** \_\_\_\_\_

**MOTION TO ALLOW CONTACT**

**COMES NOW** the victim, \_\_\_\_\_, in this case and moves this Honorable Court to lift the no contact provision in the above cause, and for reason would show \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DATED** this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Victim's Signature

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Telephone: \_\_\_\_\_

**NOTICE OF HEARING**

**PLEASE TAKE NOTE** that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_, at the hour of \_\_\_\_\_ a.m./p.m., or as soon thereafter as may be heard, the victim's Motion to Allow Contact will be heard before the Honorable Mary Handsel, at the West Pasco Judicial Center, 7530 Little Road, New Port Richey, Florida 34654.

**I HEREBY CERTIFY** that a copy of the foregoing motion and notice of hearing have been provided to the Office of the State Attorney, Judge Handsel and the Defendant.

\_\_\_\_\_  
Victim's Signature

**If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the Pasco County Customer Service Center, 8731 Citizens Drive, New Port Richey, FL 34654, (727) 847-2411 or the Pasco County Risk Management Office, 7536 State Street, New Port Richey, FL 34654 (727) 847-8028 (V) at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing or voice impaired, call 711.**