

IN THE DISTRICT COURT OF THE FIRST CIRCUIT

DIVISION
STATE OF HAWAI'I

Plaintiff

Reserved for Court Use

Civil No.

Defendant

Filing Party/Attorney (Name, Attorney Number, Firm Name (if applicable), Address, and Telephone Number

List name of Person to be examined or
Person having failed to appear:

Filing date of Motion for Order for Examination:

**EX PARTE MOTION FOR DISCONTINUANCE OF ORDER FOR
EXAMINATION AND/OR RECALL OF BENCH WARRANT**

Judgment Creditor requests to discontinue the above dated Order for Examination or Order for Examination on Judgment Debtor(s)/Person Having Knowledge and/or to recall Bench Warrant ordered on _____ and issued on _____. The Bench Warrant number is _____.

CERTIFICATE OF SERVICE

I certify that I served the Judgment Debtor(s), Person Having Knowledge, or their Attorney on (date) _____ by Hand-delivery or Mail at the following address:

Date:

Signature of Filing Party/Attorney:

Print/Type Name:

Date:

Approved and So Ordered:

Judge



In accordance with the Americans with Disabilities Act and other applicable state and federal laws, if you require an accommodation for a disability when working with a court program, service, or activity, please contact the District Court Administration Office at PHONE NO. 538-5121, FAX 538-5233, or TTY 539-4853 at least ten (10) working days before your proceeding, hearing, or appointment date. **For Civil related matters, please call 538-5629 or visit the District Court Service Center at 1111 Alakea Street, Third (3rd) Floor.**

I certify that this is a full, true, and correct
copy of the original on file in this office.

Clerk, District Court of the above Circuit, State of Hawai'i