STATE OF INDIANA ) IN THE \_\_\_\_\_\_\_\_\_\_\_\_\_\_ COURT\_\_\_\_\_

) SS: (\_\_\_\_\_\_\_\_\_\_\_\_DIVISION, ROOM \_\_\_\_)

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_ )

CASE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, )

Petitioner **(Your Name)** )

vs. )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, )

Respondent **(Person to be Restrained)** )

**PETITION FOR AN ORDER FOR PROTECTION AND REQUEST FOR A HEARING—Filed by Person Seeking Protection**

# IMPORTANT: This is a public document and a copy of it will be placed in the Court’s file. A copy may also be sent to the Respondent.

# (Check those which apply)

1. I am filing this Petition for myself:

\_\_\_a. I am or have been a victim of domestic or family violence;

\_\_\_b. I am or have been a victim of a sex offense;

\_\_\_c. I am or have been a victim of stalking;

\_\_\_d. I am or have been a victim of repeated acts of harassment.

1. The Respondent’s relationship to me is:

a. the Respondent is my family or household member (check only the line which best applies):

\_\_\_ the Respondent is my spouse;

\_\_\_ the Respondent used to be my spouse;

\_\_\_ the Respondent and I resided together in an intimate relationship;

\_\_\_ the Respondent and I have a child in common;

\_\_\_ the Respondent and I are dating, or have dated, each other;

\_\_\_ the Respondent and I are, or have been, engaged in a sexual

relationship;

\_\_\_ the Respondent and I are related by blood or adoption. The

Respondent is my \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

\_\_\_ the Respondent and I are, or used to be, related by marriage. The

Respondent is my \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

\_\_\_ the Respondent is, or used to be, my guardian;

\_\_\_ the Respondent is, or used to be, my ward;

\_\_\_ the Respondent is, or used to be, my custodian;

\_\_\_ the Respondent is, or used to be, my foster parent; or,

\_\_\_ I am a minor child of a person in one of the types of relationships

described above.

\_\_\_ I have adopted the child of the respondent.

If Respondent is not a family or household member as indicated above, but Respondent has committed stalking, a sex offense, or repeated acts of harassment (check only the line below which best applies):

1. \_\_\_the Respondent has committed stalking against me.
2. \_\_\_the Respondent has committed a sex offense against me.
3. \_\_\_the Respondent has committed repeated acts of harassment against me.
4. How old is the Respondent? \_\_\_\_\_\_\_\_ years old.
5. Please list all cases (divorce, protection orders, paternity, guardianship, criminal, juvenile, civil) involving the Respondent, yourself, or a child you have with the Respondent (attach additional sheets of paper if necessary):

Case Name Case Number County & State

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_ Continued on Attachment 4a.

1. This case is filed in this county because:

\_\_\_\_\_ a. the Respondent lives in this county.

\_\_\_\_\_ b. the incident(s) of domestic or family violence, stalking, sex

offense, or harassment happened in this county.

\_\_\_\_\_ c. I live in this county.

**6. If you are not represented by an attorney, fill in your public mailing address:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_This address will not be kept secret, so you should use a mailing address that you feel comfortable having public. The address you place on the Confidential Form, PO-0104 will be kept confidential. If the Court grants the order, you may be eligible to obtain a confidential address through the Attorney General’s Address Confidentiality Program (ACP). Email the ACP at: [confidential@atg.state.in.us](mailto:confidential@atg.state.in.us) to get information on how to participate in that program.

1. The Respondent has committed the following act(s) of domestic or family

violence, stalking, sex offense, or harassment (check those which apply):

\_\_\_ the Respondent attempted to cause physical harm to me;

\_\_\_ the Respondent threatened to cause physical harm to me;

\_\_\_ the Respondent did cause physical harm to me;

\_\_\_ the Respondent placed me in fear of physical harm;

\_\_\_ the Respondent caused me to involuntarily engage in sexual activity by

force, threat of force, or duress;

\_\_\_ the Respondent committed stalking against me;

\_\_\_ the Respondent committed a sex offense against me;

\_\_\_ the Respondent committed an act of animal cruelty by beating, torturing,

mutilating, or killing a vertebrate animal without justification with an intent

to threaten, intimidate, coerce, harass or terrorize a family or household

member;

\_\_\_ the Respondent committed repeated acts of harassment against me.

1. **Describe what happened in each of the above incidents including the date(s),**

**place(s) and witnesses to each incident *(attach additional sheets of paper if***

***necessary)*:**

**Date of Incident #1:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Place of Incident:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description of** **Incident:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**List the names of all of the people who were present during the incident. You**

**must include your own name if you were present:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of Incident #2:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Place of Incident:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description of Incident:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**List the names of all of the people who were present during the incident. You**

**must include your own name if you were present:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Date of Incident #3:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Place of Incident:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description of Incident:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**List the names of all of the people who were present during the incident. You**

**must include your own name if you were present:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**\_\_\_\_\_ Continued on Attachment 8a.**

1. **I am asking the Court to order the following relief *(check all which apply)*:**

***NOTE: The following requested relief may be granted immediately by the Judge without a hearing. However, if the petition is based on harassment alone, the relief may be granted* ONLY *after notice to the Respondent and after a hearing to be held within thirty (30) days.***

\_\_\_ Prohibit the Respondent from committing, or threatening to commit, acts of

domestic or family violence, stalking, or sex offenses against me;

\_\_\_ Prohibit the Respondent from committing, or threatening to commit, acts of

domestic or family violence, stalking, or sex offenses against my family or

household members, whose names are:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

\_\_\_ Prohibit the Respondent from harassing, annoying, telephoning, contacting,

or directly or indirectly communicating with me;

\_\_\_Order the Respondent to stay away from my residence, school, place of

employment, or other place, which is the \_\_\_\_\_\_\_\_\_\_\_, located at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

\_\_\_Order the Respondent to stay away from the following location(s) frequented

by my family or household member(s), which may include a residence,

school, or place of employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***Please complete****:*

Please list all owners or lease signers at my residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***NOTE: The following requested relief may be granted immediately by the Judge, but the Court must hold a hearing within thirty (30) days. If the petition is based on harassment alone, the relief may be granted* ONLY *after notice to the Respondent and after a hearing to be held within thirty (30) days.***

\_\_\_ Evict the Respondent from my residence, which is located at:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

\_\_\_ Order the Respondent to give me the possession and use of the following:

\_\_\_The residence located at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

\_\_\_An automobile/other motor vehicle described as: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

\_\_\_ Other necessary personal items, described as: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

\_\_\_ Prohibit Respondent from removing, transferring, injuring, concealing, harming, attacking, mistreating, threatening to harm, or otherwise disposing of the animal(s) listed below.

***Example Name: Max***

***Age/Type: 9 year old dog***

***Size /Breed: Large 55 pound black lab***

***Color/Description: Black hair, pink collar***

**Animal 1** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age/Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size/Breed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Color/Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Animal 2** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age/Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size/Breed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Color/Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional animals listed on Attachment 9(a).**

\_\_\_ Order that I will have the exclusive possession, care, custody, or control of an animal(s) owned, possessed, kept, or cared for by myself, the Respondent, a minor child of myself or the Respondent, or any other family or household member listed below.

**Animal 1** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age/Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size/Breed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Color/Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Animal 2** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age/Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Size/Breed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Color/Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional animals listed on Attachment 9(a).**

**\_\_\_**Order the following additional relief necessary to provide for my safety and

welfare and the safety and welfare of my family or household members:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***NOTE: The following requested relief may be granted* ONLY *after notice to the Respondent and after a hearing to be held within thirty (30) days:***

\_\_\_ Specify the arrangements for parenting time with our minor child(ren);

\_\_\_ Require that parenting time be supervised by a third party;

\_\_\_ Deny the Respondent parenting time;

\_\_\_ Order the Respondent to pay my attorney fees;

\_\_\_ Order the Respondent to pay rent for my residence;

\_\_\_ Order the Respondent to make payment on a mortgage for my residence;

\_\_\_ Order the Respondent to pay child support for our minor child(ren);

\_\_\_ Order the Respondent to pay support/maintenance for me;

\_\_\_ Order the Respondent to reimburse me for expenses related

to the domestic or family violence, stalking, sex offense, or harassment as follows:

***(specify the amount for each expense and bring documentation of the***

***expense with you to Court for the Hearing)***:

\_\_\_ Medical expenses: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ Counseling: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ Shelter: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ Repair or replacement of

damaged property: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ Other costs or fees I have

as a result of bringing this case: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ Prohibit the Respondent from using or possessing a firearm, ammunition, or

deadly weapon;

\_\_\_ Order the Respondent to surrender the following firearm(s), ammunition, or

deadly weapon(s) to a specified law enforcement agency ***(list each item***

***below and attach an additional sheet of paper if necessary)***:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;**

**\_\_\_\_\_ Continued on Attachment 9(b).**

\_\_\_ Order a wireless service provider to transfer to me the right to continued use of, and financial responsibility for, the following telephone number(s) used by me or by a minor child in my custody:

TelephoneNumber and User: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wireless Service Provider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Account Holder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number and User: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wireless Service Provider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Account Holder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional telephone numbers listed on Attachment 9(c)**

***NOTE: A wireless service provider’s normal requirements for setting up a new cellular telephone account still apply. You should consider whether you will be able to set up an account in your own name and whether you will be able to pay for the account.***

1. **Number of pages attached: \_\_\_\_\_**

**By filing this Petition, I am respectfully requesting that the Court immediately issue an Ex Parte Order for Protection. I understand that, if I have asked the Court for any of the following:**

* **evicting the Respondent from my/our home;**
* **giving me the possession of personal property;**
* **giving me possession of an animal;**
* **prohibiting Respondent from taking action against an animal;**
* **establishing rules for child parenting time;**
* **requiring the Respondent to pay fees, expenses, or child support;**
* **forbidding the Respondent from possessing a firearm, ammunition, or a deadly weapon;**
* **ordering the Respondent to surrender firearm(s), ammunition, or deadly weapons, or,**
* **allowing me or a child to continue to use a telephone number for which I will be financially responsible;**

**I must also ask the Court to set a date for a Hearing within thirty (30) days of today’s date.**

**I understand that if my petition is based on harassment alone, the Court may grant relief ONLY after notice to the Respondent and after a hearing to be held within thirty (30) days.**

**I understand that if a Hearing is set, and if I fail to appear for the Hearing, the Court may terminate the Ex Parte Order and/or dismiss the case.**

**I affirm, under the penalties for perjury, that the foregoing representations are true:**

1. **on the basis of my own personal knowledge.**
2. **on the basis that I have been informed and believe that the facts stated are true. *(NOTE: If this Petition is made solely on the basis of Petitioner’s information and belief, Petitioner must attach affidavits by one or more persons who have personal knowledge of the facts stated.)***

**DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PETITIONER (Signature)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PETITIONER (Type or print name)**