IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS

____ DIVISION

PETITIONER'S/AFF	FIANT'S FIRST NAME, LAST NAME	PETITIONER'S/AFFIANT'S HOME ADDRESS (STREET)						
AGE	DATE OF BIRTH	CITY	STATE	ZIP CODE				
DRIVER'S LICENS	E NUMBER	PETITIONER'S	PETITIONER'S/AFFIANT'S PLACE OF WORK (NAME)					
TELEPHONE NUM	BER	STREET ADDRE	ESS OF PLACE OF WORK					
		CITY	STATE	ZIP CODE				
VS.	CASE NO. 60DR_							
RESPONDENT'S FI	RST NAME, LAST NAME	RESPONDENT'S	RESPONDENT'S HOME ADDRESS (STREET)					
AGE	DATE OF BIRTH	CITY	STATE	ZIP CODE				
DRIVER'S LICENS	E NUMBER	RESPONDENT'S PLACE OF WORK (NAME)						
TELEPHONE NUMBER		STREET ADDRE	STREET ADDRESS OF PLACE OF WORK					
		CITY	STATE	ZIP CODE				

PETITION AND AFFIDAVIT FOR AN ORDER OF PROTECTION

I, the petitioner/affiant am asking the Court to issue an Order of Protection. A hearing will be set within 10 to 30 days. At the hearing, I will present evidence for an Order of Protection, and the respondent will have an opportunity to appear and contest the Order of Protection. I state, under oath and subject to the penalty of PERJURY, that the following facts are true and correct to the best of my knowledge and belief:

1 I am at least 18 years of age, or I am under 18 years of age but emancipated.
Respondent is at least 18 years of age, or under 18 but emancipated.
I am an employee or volunteer of a domestic violence shelter or program, and I am filing on behalf of a minor
I am filing this petition:
(A) on behalf of myself AND/OR, (B) on behalf of a family or household member who is: a minor(s), Name(s):
an adjudicated incompetent person(s), Name(s):
2. The relationship between Respondent and me (or the person(s) on whose behalf I am filing this petition and affidavit is/are: (CHECK ALL THAT APPLY)):
(A) We are spouses or former spouses (Divorce date:)
(B) We are related by blood:
 i Respondent is the parent ii Respondent is my child iii Other BLOOD relationship; Respondent is my
(C) We currently reside together or cohabited. Date we started living together: Month/Year
(D) We formerly resided together or cohabited. Date we lived together: Month/Year until Month/Year
(E) We have or have had a child in common.
(F) We are presently or in the past have been in a dating relationship. Length of Relationship: Month/Year until Month/Year
(G) We are in-laws related by marriage within the second degree of consanguinity.
3. I believe I am entitled to an Ex-Parte Temporary Order of Protection because I (or the person(s) on whose behalf I am filing this petition and affidavit am (is/are) afraid of the respondent and there is an immediate and present danger of domestic abuse. (In the following section, describe the details of the MOST RECENT ACT to you or members of you household that caused you to seek the Court's assistance. DO NOT LIST PREVIOUS THREATS OF ACTS OF ABUSE IN THIS SECTION.
DATE OF MOST RECENT ACT: (Include the day of the week)
LOCATION OF MOST RECENT ACT:(Address)

***** DO NOT WRITE BELOW THIS LINE OR ON BACK OF PAGES *****

THREATS OF PHYSICAL HARM: (STATE THE SPECIFIC THREATS)					

(If more space is needed, you may attach additional page(s) as page 3A, 3B, etc.)
***** DO NOT WRITE BELOW THIS LINE OR ON BACK OF PAGES *****

ACTUAL PHYSICAL ABUSE OR HARM: (DESCRIBE THE PHYSICAL ACTS)						
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(If more space is needed, you may attach additional page(s) as page 4A, 4B, etc.)
***** DO NOT WRITE BELOW THIS LINE OR ON BACK OF PAGES *****

	dent's release there will be an immediate and present danger of domestic abuse to me.	
Place of	of incarceration:	
Date of	f release:	
The rea	asons I believe I will be in danger when respondent is released are:	••••
	The above MOST RECENT ACT was reported to a law enforcement agency. No Yes, it was reported to:	••••
Agency	y Date	
Action	taken by the law enforcement agency.	
5.	PREVIOUS acts of domestic violence by Respondent against me (or the person(s) on whose beh I am filing this petition and affidavit, including verbal threats, harassment and physical abuse, a (DO NOT INCLUDE THE ACTS LISTED IN SECTION 3).	
5.	PREVIOUS acts of domestic violence by Respondent against me (or the person(s) on whose beh I am filing this petition and affidavit, including verbal threats, harassment and physical abuse, a	
	PREVIOUS acts of domestic violence by Respondent against me (or the person(s) on whose beh I am filing this petition and affidavit, including verbal threats, harassment and physical abuse, a	
6.	PREVIOUS acts of domestic violence by Respondent against me (or the person(s) on whose beh I am filing this petition and affidavit, including verbal threats, harassment and physical abuse, a (DO NOT INCLUDE THE ACTS LISTED IN SECTION 3). The Respondent has previously been arrested for or convicted of acts of violence.	
6. WHEN	PREVIOUS acts of domestic violence by Respondent against me (or the person(s) on whose beh I am filing this petition and affidavit, including verbal threats, harassment and physical abuse, a (DO NOT INCLUDE THE ACTS LISTED IN SECTION 3). The Respondent has previously been arrested for or convicted of acts of violence. No Yes. If yes, give the following details:	
6. WHEN	PREVIOUS acts of domestic violence by Respondent against me (or the person(s) on whose beh I am filing this petition and affidavit, including verbal threats, harassment and physical abuse, a (DO NOT INCLUDE THE ACTS LISTED IN SECTION 3). The Respondent has previously been arrested for or convicted of acts of violence. No Yes. If yes, give the following details: WHERE: WHERE:	

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addresses if different from yours.) DO NOT LIST YOUR CHILDREN UNLESS THEY ARE ALSO RESPONDENT'S CHILDREN. NAME **AGE ADDRESS** NAME AGE **ADDRESS** NAME AGE **ADDRESS** If there are minor children living IN THE RESIDENCE YOU REQUEST THAT RESPONDENT BE EXCLUDED who are yours OR Respondent's, but not belonging to both of you, please list them below: Petitioner's/Affiant's children only: Respondent's children only: 8. I, the Petitioner/Affiant, ask the Court to issue an Ex-Parte Temporary Order of Protection with the following provisions: (CHECK ALL THAT ARE APPLICABLE) Excluding the Respondent from a shared residence or from the residence of the Petitioner/Affiant or Victim. Address of residence: Owner/Renter of residence (Circle ONE): Petitioner Both Neither Respondent Excluding the Respondent from the place of business, employment, school, or other location of the Petitioner/Affiant or Victim, which is: Name of Business or employment Address of Business or employment City School Address of School City

7. THE RESPONDENT AND I have the following minor children: (State their names, ages, and

***** DO NOT WRITE BELOW THIS LINE OR ON BACK OF PAGES *****

Other: Identify:	
Address	City
Prohibiting the responde except under the following cond	ent, directly or through an agent, from contacting the petitioner or victim, litions:
Awarding Petitioner/Affi	ant temporary custody of the minor children listed in Paragraph 7:
Requiring the respondent State the weekly take-he	to pay child support. ome pay of Respondent:
Requiring the respondent State the weekly take-he	to pay spousal support. ome pay of Respondent:
Excluding the Petitioner'	s/Affiant's address from notice to the respondent.
Requiring Respondent to attorney's fees (if applied	pay filing fee, service fees, court costs, and Petitioner's/Affiant's cable).
Parte Temporary Order I, the Petitioner, reques	of Protection, a hearing may still be scheduled for an Order of Protection. t that after the hearing the Court issue an Order of Protection based upon ave requested in Paragraph 8.
10. A Court Order ALREA listed in Paragraph 7. No	ADY EXISTS concerning the custody of Respondent's and my child(ren) Yes
	ats of the order, as follows:
H 125, state the conter	us of the order, as follows.
COUNTY AND STAT	E WHERE ORDER WAS ISSUED
WHO WAS AWARDE	D CUSTODY AMOUNT OF CHILD SUPPORT
11. The Respondent and I Court:	have been involved in the following cases in the Pulaski County Circuit
Type of Case:	
Domestic Abuse Divorce Paternity Child Support Other	Date(s): Date(s): Date(s): Date(s): Date(s):

I, the Petitioner/Affiant, state under oath and subject to the penalty of PERJURY that the above Petition and Affidavit for an Order of Protection and following Notice contain facts which are true and correct to the best of my knowledge and belief. I UNDERSTAND THAT IF I DO NOT RETURN TO THE SCHEDULED HEARING, THE PETITION AND AFFIDAVIT FOR AN ORDER OF PROTECTION PROBABLY WILL BE DISMISSED. I understand that if any of the above statements are later determined by the Court to be false, I may be assessed the costs of this action, including filing fees, Sheriff's service fees, and the Respondent's attorney's fees, if any.

DATE:	Petitioner's/Affiant's signature				
	VERIFICATIO	ON			
STATE OF ARKANSAS COUNTY OF PULASKI					
Subscribed and sworn to before me this _	day of	, 20			
Notary Public					
My Commission Expires:					

NOTICE

All persons filing a <u>Petition for Order of Protection</u> must provide as much of the following information as possible:

Respondent/I	Defendant		Respon	ndent Ide	ntifiers			
First	Middle	Last		Sex	Race	DOB MM/DD/YYY	Y Height	Weigh
Address:								
				Ey	es	Hair	SS#	
					Pho	ne #	DL# and ID#	other
Employer:								
Caution:								
☐ Responder	nt possesses a fir	earm						
☐ Responder	nt has a history o	of extreme vi	olence					
Distinguishin	g Characteristic	s:						
Relationship	Identifiers: □ C	Current or fo	rmer spous	se □ Pare	nts of ch	ild(ren) in comm	on	
☐ Live togetl	her □ Cu	rrent or past	dating rela	ationship				
☐ Other Rela	ative (Explain) _						_	