## · FOR USE BY LAW ENFORCEMENT ONLY

	LAW ENFORCEMENT INFORMATION								
	ompleted for is required nt only. <i>Addresses, birtho</i>								
RESPONDI		Name of Respondent (First, Middle, Last)							
INFORMAT	TON								
Social Security Number or ID Number (specif		/) Nickname		Sex		Race		Birthdate	
Height	Weight	Eye Color	Hair Co	lor	Skin Tone	Build	<u> </u> 	Relation to Petitioner	
Current Address		S	Home Phone			Inter	Interpreter Required? Language		
	:								
Employer			Employer Address				WORK		
:	·	·					Hours: Phone:		
Vehicle License Number		Vehicle Make and Model				Vehicle	Color	Vehicle Year	
•				•					
PETITION	ER	Name of Petitioner (First, Middle, Last)							
INFORMAT	ION		٠						
	Social Security	Number or ID Num	ber (specify)				Birthda	ite/Age	
					WORK				
						Hours: Phone:			
	Contact Name		Contact Address				Contact Phone		
PERSONS PRO	TECTED BY THIS O	RDER		(1	MUST LIST NA	ME AND DA	TE OF BI	RTH)	
			•						
Na	me/Birthdate/Social Secu	ritu Numbar			Nama (Di	athadasta (Caralas) C			
	me) bii tridate) social sect	inty Number .			<i>пите</i> в п	thdate/Social Se	ecurity Nun	nber	
0 (01.11.1)	-	5 (OIL )							
2. (Child)       5. (Other)         3. (Child)       6. (Other)									
		7			· - •				
HAZARD INFO	RMATION	Weapons	Guns/Rifles	Kniv	es Explosive	s Other	· Lo	cation of Weapon	
Itemize/Explain:						•		Vehicle On Person	
		,						Residence 🗌	
CURRENT STA	TUS		(ciı	cle)	Respondent's Hi	story includes:	<u></u>		
Are you and the res	pondent living together	No Mental Health Problems (Commitment, Treatment, Suicide							
Does the respondent know you are trying to get this order?				No No	No Attempt, Other) Assault Assault with weapon				
Does the respondent know he/she may be moved out the home?  Is the respondent likely to react violently when served?					Alcohol/Drug Abuse Active Warrant for Arrest				

This information/Items *must* be provided for the Protection Order to be entered into the NCIC law enforcement data system.