



IN THE _____ JUDICIAL CIRCUIT, _____, MISSOURI

Judge or Division:	Case Number:	
	Court ORI Number:	
Petitioner:	MSHP Number:	
	Responsible Law Enforcement ORI:	
	Related Cases:	(Date File Stamp)
vs.		
Respondent:	Respondent's Home Address:	
Alias/Nicknames:	Home Phone Number:	
Respondent's DOB:	Respondent's Work Address:	
SSN (if known, last four digits):	Work Phone Number:	
Race:	Sex: <input type="checkbox"/> F <input type="checkbox"/> M	Work Hours:
	Other Locations Where Respondent May Be Served:	
	Petitioner's Relationship to Respondent pursuant to 18 U.S.C. §§ 921(a)(32) and 922(g)(8) determination: <input type="checkbox"/> Spouse <input type="checkbox"/> Child(ren) in common <input type="checkbox"/> Former spouse <input type="checkbox"/> Intimate residing/resided together <input type="checkbox"/> Are/were in a continuing social relationship of a romantic/intimate nature <input type="checkbox"/> Related by blood. Define relationship: _____ <input type="checkbox"/> Related by marriage. Define relationship: _____ <input type="checkbox"/> Residing/resided together; no intimacy <input type="checkbox"/> Stalking/Sexual Assault. Define relationship: _____	

Motion for Renewal of Full Order of Protection - Adult

The Petitioner requests that the court renew the Full Order of Protection that was issued against Respondent on _____ (date) and terminates on _____ (date) for the reason that:

- The expiration of the full order will place me in immediate and present danger of domestic violence, stalking, or sexual assault.
- The circumstances forming the basis for the initial order continue to exist.
- The following incidents of domestic violence, stalking, or sexual assault have occurred since the date the petition was filed: _____

- Other reasons: _____

Pursuant to section 455.040, RSMo, Petitioner requests that the court renew the full order of protection for not less than 180 days and not more than one year. A finding by the court of a subsequent act of domestic violence, stalking, or sexual assault is not required for a renewal order of protection.

I swear/affirm under penalty of perjury that these facts are true according to my best knowledge and belief.

NOTICE: Section 455.030.3, RSMo, provides that a Petitioner seeking protection under the Domestic Violence Act is not required to reveal any current address or place of residence on this motion. **Do not provide this information if doing so will endanger you.**

Date

Petitioner's Signature

Address (Optional)

City, State and Zip

Telephone

Attorney's Name, Missouri Bar No., if Applicable

Address

City, State and Zip

Telephone