



IN THE CIRCUIT COURT OF \_\_\_\_\_ COUNTY, MISSOURI

Judge or Division:	Case Number:
	Court ORI Number:
Petitioner:	Respondent's Home Address:
Petitioner's DOB: SSN: Sex <input type="checkbox"/> F <input type="checkbox"/> M Race: vs.	(Date File Stamp)
Respondent:	
Respondent's DOB: SSN: Race: Sex <input type="checkbox"/> F <input type="checkbox"/> M Age: Eye Color: Height: Hair Color: Weight: (Identifying Information for use by Law Enforcement)	Respondent's Work Address:

**Adult Abuse/Stalking Petition for Foreign Order of Protection**

By this petition I request registration of the order of protection described above as permitted by Section 455.067 RSMo.

☐ A certified copy of the foreign order of protection is attached.

Subsequent orders affecting foreign order of protection (if any): (Describe below; e.g., divorce order, extension of original protection order, etc.)

_____	_____
	Date of Order
_____	_____
	Date of Order
_____	_____
	Date of Order

I swear the facts stated in the above petition are true and that the order of protection filed with this petition is in effect according to my best knowledge and belief.

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Petitioner's Address (unless disclosure waived)