



IN THE CIRCUIT COURT OF _____ COUNTY, MISSOURI

Judge or Division:	Case Number:
	Court ORI Number:
Petitioner: Petitioner's DOB: SSN: Sex <input type="checkbox"/> F <input type="checkbox"/> M Race: _____ vs.	Respondent's Home Address: (Date File Stamp)
Respondent: Alias/Nicknames Respondent's DOB: SSN (if known): Race: Age: Sex <input type="checkbox"/> F <input type="checkbox"/> M Eye Color: Height: Hair Color: Weight: (Identifying Information for use by Law Enforcement)	Respondent's Work Address: Respondent's Relationship to Petitioner: <input type="checkbox"/> Spouse <input type="checkbox"/> Ex-Spouse <input type="checkbox"/> Related by Blood/Marriage <input type="checkbox"/> Child(ren) in Common <input type="checkbox"/> Resided Together <input type="checkbox"/> Other _____

Adult Abuse/Stalking Petition for Order of Protection

1. I am Petitioner and Respondent is	<input type="checkbox"/> at least 18 years of age	<input type="checkbox"/> under 18 but emancipated
2. I reside in _____ (city), _____ (state), in the County of _____.	Respondent may be found in _____ (city), _____ (state), in the County of _____.	
3. An act of abuse or stalking occurred at _____ (address), _____ (city), _____ (state), in the County of _____.		
4. Respondent and I: (check one or more)	<input type="checkbox"/> are related by blood.	<input type="checkbox"/> were related by marriage.
	<input type="checkbox"/> are spouses.	<input type="checkbox"/> are related by marriage.
	<input type="checkbox"/> were spouses.	<input type="checkbox"/> have no relationship other than Respondent has stalked me.
	<input type="checkbox"/> have child(ren) in common.	<input type="checkbox"/> are in a continuing romantic or intimate social relationship.
	<input type="checkbox"/> are or were residing together.	<input type="checkbox"/> were in a continuing romantic or intimate social relationship.
Complete for Adult Abuse Petition Only.		
5. Respondent and I: (check one or more)	<input type="checkbox"/> reside together.	
	<input type="checkbox"/> previously resided together at _____ (address), _____ (city), _____ (state), in the County of _____.	
	<input type="checkbox"/> never resided together.	
Complete for Stalking Petition Only.		
6. Respondent is stalking me. Explain relationship (example: co-workers, neighbors, etc.)	_____	_____

Complete for Adult Abuse Petition Only.

7. The residence in which I live is: (check one or more)

- jointly owned, leased or rented or jointly occupied by Respondent and me.
- owned, leased, rented or occupied by me.
- jointly owned, leased, rented or occupied by me and someone other than Respondent.
- owned, leased, rented or occupied by someone else, and Respondent is my spouse.
- jointly occupied by me and another person, and Respondent has no property interest therein.

8. Respondent has knowingly and intentionally: (check at least one)

- coerced me
- stalked me
- harassed me
- sexually assaulted me
- unlawfully imprisoned me
- followed me from place to place
- caused or attempted to cause me physical harm
- placed or attempted to place me in apprehension of immediate physical harm
- threatened to do any of the above

by the following act(s): (Include the most recent date(s) of each act described.)

9. I am afraid of Respondent, and there is an immediate and present danger of abuse or stalking of me because: (describe)

10. Photographs/Exhibits are filed as evidence of my injuries.

Complete for Adult Abuse Petition Only.

11. It is in the best interest of the minor children that custody be awarded as follows:

	<u>Child's Name</u>	<u>DOB</u>	<u>SSN</u>	<u>Age</u>	<u>Address</u> (If other than Petitioner)
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____

	<u>Who did each Child reside with during last six months</u>	<u>Relationship to Parties (Explain if not Respondent's Child)</u>	<u>Persons to Receive Custody</u>	<u>Custody</u> (check one or both)	
				<u>Temporary</u>	<u>Full</u>
1.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
2.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
5.	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

(If necessary, attach additional sheets.)

12. Indicate any prior or pending custody court cases before, or orders entered by, this court for the following parties.
(If none, so state):

- a. Petitioner _____
- b. Respondent _____
- c. Children (identified in item 11) _____

13. Pursuant to Section 455.010 to Section 455.085 RSMo, it is requested that the court issue an Ex Parte Order of Protection restraining Respondent from: (check all that apply)
- abusing, threatening to abuse, molesting or disturbing the peace of Petitioner wherever Petitioner may be found.
 - stalking Petitioner.
 - entering the dwelling of Petitioner located at (see notice below) _____
 - communicating with Petitioner in any manner or through any medium.
 - other: _____

14. It is further requested that, upon the hearing of this cause, the court issue an Order of Protection enjoining Respondent from the above acts for such time as is necessary to protect Petitioner and that the court: (one or more may be selected)
- Award custody of the minor child(ren) to Petitioner Respondent.
 - Order visitation with the minor child(ren) to Petitioner Respondent as follows: _____
 - Order Petitioner Respondent to pay child support to Petitioner Respondent in the amount of \$ _____ (check one) per week per month.
 - Order Petitioner Respondent to pay maintenance to Petitioner Respondent in the amount of \$ _____ (check one) per week per month.
 - Order that Respondent make or continue to make the rent or mortgage payments in the amount of \$ _____ on the residence occupied by Petitioner.
 - Order that Respondent pay Petitioner's rent at a residence, other than the residence previously shared with Respondent, in the amount of \$ _____.
 - Order that Petitioner be given temporary possession of the following personal property:

 - Prohibit Respondent from transferring, encumbering, or otherwise disposing of the following property mutually owned or leased with Petitioner: _____
 - Order Respondent to participate in a court-approved counseling program designed to help batterers stop violent behavior.
 - Order Respondent to pay a reasonable fee for housing and other services provided to Petitioner by a shelter for victims of domestic violence.
 - Order Respondent to pay the cost of medical treatment or services provided to Petitioner as a result of injuries sustained by an act of domestic violence committed by Respondent.
 - Order Respondent to pay Petitioner's attorneys fees.
 - Order Respondent to pay court costs.
 - Other (specify): _____

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 Adult Abuse Act is not required to reveal any current address or place of residence on this petition. **Do not provide this information if doing so will endanger you.**

Petitioner's Signature

Address (Optional)

City, State and Zip

Telephone

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

Address

City, State and Zip

Telephone