



IN THE 31ST JUDICIAL CIRCUIT COURT OF GREENE COUNTY, MISSOURI

Judge or Division:	
Petitioner:	
Case Number:	

THIS INFORMATION IS FOR COURT USE ONLY. IT WILL NOT BE REVEALED TO THE RESPONDENT.
INSTRUCTIONS TO CLERK: THIS FORM IS TO BE SCANNED SEPARATELY FROM THE PETITION AND AT A CONFIDENTIAL LEVEL. (CHILD PROTECTION EX PARTE ORDERS)

PETITIONER'S FULL NAME: _____ PETITIONER'S SSN: ____--____--____ <hr/> RESPONDENT'S FULL NAME: _____ RESPONDENT'S SSN: ____--____--____	CHILD OR CHILDREN'S INFORMATION: <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 75%;">NAME</th> <th style="width: 20%;">DOB</th> </tr> </thead> <tbody> <tr><td>1)</td><td>_____</td><td>_____</td></tr> <tr><td>2)</td><td>_____</td><td>_____</td></tr> <tr><td>3)</td><td>_____</td><td>_____</td></tr> <tr><td>4)</td><td>_____</td><td>_____</td></tr> <tr><td>5)</td><td>_____</td><td>_____</td></tr> <tr><td>6)</td><td>_____</td><td>_____</td></tr> <tr><td>7)</td><td>_____</td><td>_____</td></tr> <tr><td>8)</td><td>_____</td><td>_____</td></tr> <tr><td>9)</td><td>_____</td><td>_____</td></tr> <tr><td>10)</td><td>_____</td><td>_____</td></tr> </tbody> </table>		NAME	DOB	1)	_____	_____	2)	_____	_____	3)	_____	_____	4)	_____	_____	5)	_____	_____	6)	_____	_____	7)	_____	_____	8)	_____	_____	9)	_____	_____	10)	_____	_____
	NAME	DOB																																
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7)	_____	_____																																
8)	_____	_____																																
9)	_____	_____																																
10)	_____	_____																																

CHECK THIS BOX, IF YOU BELIEVE THAT DISCLOSING YOUR OR YOUR PROTECTED CHILD'S CURRENT ADDRESS OR PLACE OF RESIDENCE MAY ENDANGER THE CHILD/CHILDREN. IF THE BOX IS CHECKED, IT IS IMPORTANT THAT YOU COMPLETE THE INFORMATION DIRECTLY BELOW. TO MAINTAIN THE CONFIDENTIALITY OF THE LOCATIONS, YOU WILL INDICATE "PROTECTED ADDRESS" IN THE ADDRESS FIELDS THAT APPLY ON THE FOLLOWING PAGES. IF THE BOX IS LEFT UNCHECKED, YOU MAY CONTINUE TO THE NEXT PAGE.

**CHILD PROTECTION – PETITIONER AND PROTECTED CHILD INFORMATION
TO BE KEPT CONFIDENTIAL**

PROTECTED CHILD'S PERMANENT ADDRESS: _____ _____ _____ MAIN PHONE NUMBER: _____ ALTERNATE PHONE NUMBER: _____ <hr/> OTHER ADDRESS INFO RELEVANT TO CHILD: _____ _____ _____ _____	PETITIONER'S PERMANENT ADDRESS: _____ _____ _____ MAIN PHONE NUMBER: _____ ALTERNATE PHONE NUMBER: _____ <hr/> OTHER ADDRESS INFO RELEVANT TO PETITIONER; _____ _____ _____ _____
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**PRE-FILING QUESTIONNAIRE
FOR AN ORDER OF PROTECTION**

****PLEASE READ CAREFULLY****

UNDERSTAND:

***FAILURE TO FULLY COMPLETE THIS PETITION MAY RESULT IN THE DENIAL OF THE EX PARTE ORDER.**

***CHANGING OR ALTERING THE PRE-PRINTED TEXT ON THIS PETITION MAY RESULT THE DENIAL OF THE EX PARTE ORDER.**

***THERE IS NO FILING FEE OR COURT COSTS ASSOCIATED WITH FILING ORDERS OF PROTECTION. IF A GUARDIAN AD LITEM IS APPOINTED IN TO REPRESENT THE CHILDREN IN THE MATTER, THE COURT WILL ASSESS A COST TO BOTH YOU AND THE RESPONDENT ON THE HEARING DATE.**

***IF YOU DO NOT WANT TO REVEAL YOUR ADDRESS TO THE RESPONDENT, PLEASE WRITE "PROTECTED ADDRESS" IN THE BOX THAT REQUIRE YOUR ADDRESS. YOU WILL NEED TO COMPLETE THE CONFIDENTIAL ADDRESS FORM WHEN YOU TURN IN YOUR PETITION.**

***AT THE REQUEST OF THE COURT, A COMPUTER CHECK WILL BE MADE TO SEE WHAT ACTIONS HAVE BEEN TAKEN OR PENDING AGAINST THE PARTIES INVOLVED IN THIS ORDER.**

***IF THE ALLEGATIONS REGARDING THE CHILDREN IN THE PETITION QUALIFIES UNDER THE MANDATATED ABUSE/NEGLECT REPORTING LAW, A HOTLINE WILL BE MADE TO THE CHILDREN'S DIVISION.**

***ONCE YOU COMPLETE THIS PETITION AND GIVE IT TO THE CLERK, THE PETITION CANNOT BE DISMISSED UNTIL THE DATE OF THE HEARING.**

***IF THE JUDGE SIGNS AND APPROVES YOUR ORDER, YOU MUST RETURN TO THIS OFFICE AND PICK UP YOUR COPY OF THE ORDER.**

***IF THE JUDGE SIGNS YOUR ORDER, YOU WILL HAVE TO APPEAR FOR A HEARING AT A LATER DATE.**

NOTE: For the purpose of this action you are referred to as the PETITIONER and the person you are filing against will be referred to as the RESPONDENT.

- 1) Who directed or referred you to file this order? _____
- 2) Do you live in Greene County? YES NO
- 3) Does the RESPONDENT live in Greene County? YES NO If NO, what county? _____
- 4) Did the act of abuse/stalking take place in Greene County? YES NO If NO, what county? _____
- 5) Do you have a good address (home or work) for the RESPONDENT? YES NO
You cannot receive the full order of protection until the RESPONDENT is served at a good address
- 6) Do you and the RESPONDENT have children together? YES NO
If YES,
 - a) Who has physical custody of the children at this time? PETITIONER RESPONDENT other _____
 - b) Is there a prior order of custody entered or current case pending regarding the children you have in common? YES NO
If YES, what type of action? divorce paternity action modification other _____
What county was the action filed? _____

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS:

SIGN YOUR NAME /s/ _____

PRINT YOUR NAME _____



IN THE CIRCUIT COURT OF GREENE COUNTY, SPRINGFIELD, MISSOURI

CHILD ABUSE EX PARTE ORDER OF PROTECTION		Court Case Number																
Petitioner's Full Name: _____ vs. _____ DOB: _____ Age: _____ Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race: _____	Respondent's Full Name: _____ _____ DOB: _____ Age: _____ Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race: _____ (Date File Stamp)																	
In the interest of: <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Child(ren)'s Name</td> <td style="width: 15%;">Race</td> <td style="width: 15%;">Sex (M/F)</td> <td style="width: 45%;">Age</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </table>	Child(ren)'s Name	Race	Sex (M/F)	Age	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	Respondent's Home Address: _____ _____ Phone: _____	Respondent's Work Address: _____ _____ Work Days/Hours: _____
Child(ren)'s Name	Race	Sex (M/F)	Age															
_____	_____	_____	_____															
_____	_____	_____	_____															
_____	_____	_____	_____															
Petitioner's Home Address: _____ _____ Child's Home Address: _____ _____	Respondent's Information (Identifying Information for use by Law Enforcement) SSN (if known; last 4 digits) : _____ Hair Color: _____ Height: _____ Weight: _____ Eye Color: _____ Vehicle:(color, year, make/model, license no.) _____																	
Protected Child's Relationship to Respondent: (check one) <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> other(specify) _____																		
THE STATE OF MISSOURI TO RESPONDENT: The Petitioner has filed a verified petition (copy attached) requesting a Full Order of Child Protection against you. Pursuant to Sections 455 RSMo, the court finds that there is an immediate and present danger of domestic violence, sexual assault, or stalking by you to the child(ren) listed above, and there is good cause to issue an Ex Parte Order of Protection and that no prior order regarding custody is pending or has been made regarding these children. THEREFORE, THE COURT ORDERS YOU, _____ (Respondent's name) NOT: <ol style="list-style-type: none"> Commit or threaten to commit domestic violence, stalking, sexual assault, molesting, or disturbing the peace of the protected child(ren); Abuse or threaten to abuse the protected child(ren)'s pet(s). The possession of the following pet(s) is awarded, until further order of the court, as follows: _____. Communicate with the protected child(ren) in any manner or through any medium, except as specifically authorized by this Order; _____. Enter the family home, place of employment or school of the protected child(ren) located at: _____, except as specifically authorized by this Order. Be within _____ (distance) of the protected child(ren). It is further ordered that custody shall be awarded, until further order of the Court, as follows: <table style="width:100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 35%; text-align: left;"><u>Child's Name</u></th> <th style="width: 15%; text-align: left;"><u>Age</u></th> <th style="width: 50%; text-align: left;"><u>Person Awarded Custody</u></th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>			<u>Child's Name</u>	<u>Age</u>	<u>Person Awarded Custody</u>	_____	_____	_____	_____	_____	_____	_____	_____	_____				
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_____	_____	_____																
_____	_____	_____																
_____	_____	_____																
VIOLATION OF THIS ORDER MAY BE PUNISHED BY CONFINEMENT IN JAIL FOR AS LONG AS FOUR YEARS AND A FINE OF AS MUCH AS \$10,000. IF SO ORDERED BY THE COURT, RESPONDENT IS FORBIDDEN TO ENTER OR STAY AT THE PROTECTED CHILD'S RESIDENCE																		
<input type="checkbox"/> PETITION DISMISSED FOR FAILURE TO ALLEDGE FACTS SUFFICIENT FOR COURT TO HAVE JURISDICITON _____ JUDGE INITIALS	<input type="checkbox"/> EX PARTE RELIEF DENIED, HEARING DATE ON FULL ORDER OF PROTECTION AS INDICATED BELOW _____ JUDGE INITIALS	<input type="checkbox"/> EX PARTE ORDER OF PROTECTION IS ISSUED BY THIS COURT AND WILL REMAIN IN EFFECT UNTIL THE HEARING DATE ON THE FULL ORDER OF PROTECTION AS INDICATED BELOW SO ORDERED: _____ DATE _____ JUDGE																
THE HEARING OF THIS CAUSE SHALL BE IN FAMILY COURT OF THE CIRCUIT COURT OF GREENE COUNTY, IN SPRINGFIELD, MISSOURI AT _____ ON _____ TIME _____ DATE _____.																		

Sheriff's or Server's Return

Note to Serving Officer: Service must be at least 3 days prior to the date of the hearing.

I certify that I served this Order and a copy of the Petition at _____ (address) in _____ (County/City of St. Louis), MO, on _____ (date), at _____ (time), by:

(Check one)

- delivering a copy of the order and the petition to _____ (name).
- leaving a copy of the order and the petition at the dwelling house or usual place of abode of _____ (name), with _____ (name), a person at least 18 years of age residing therein.
- other (describe) _____.

Respondent is under the age of 18 and not emancipated. A custodial parent, guardian, or court appointed GAL was served and is required to appear and bring Respondent before the court.

Complete any known identifying information regarding Respondent that has not been already provided:

Age: _____ D.O.B.: _____ S.S.N. (last four digits): _____ Race: _____ Sex: _____
Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____ License Plate No.: _____
Identifying Marks: _____

Printed Name of Sheriff or Server

Sheriff or Server

Agency ORI

Must be sworn before a notary public if not served by an authorized officer

(Seal)

Subscribed and sworn to before me on this _____ (date).

My commission expires: _____ Date _____ Notary Public

Missouri and federal law provide that the costs and fees for service of protection orders are not required. (Section 455.027, RSMo, & 34 U.S.C. § 10450)

Complete for Out of State Service

I certify that:

- 1) I am authorized to serve process in civil actions within the state or territory where the above order and petition were served.
- 2) My official title is _____ of _____ County, _____ (state).

Served in _____ County, _____ (state), on _____ (date) at _____ (time).

Subscribed and Sworn To before me on this _____ (date).

I am: (check one)

- the clerk of the court of which affiant is an officer.
- the judge of the court of which affiant is an officer.
- authorized to administer oaths in the state in which the affiant served the above order and petition. (use for out-of-state officer)
- authorized to administer oaths. (use for court-appointed server)

(Seal)

Signature and Title

Missouri and federal law provide that the costs and fees for service of protection orders are not required. (Section 455.027, RSMo, & 34 U.S.C. § 10450)

Directions to Officer Making Return on Service

A copy of the order and the petition must be served on each person. If any person refuses to receive the copy of the order and the petition when offered to him/her, the return shall be prepared to show the offer of the officer to deliver the order and the petition and the person's refusal to receive the same.

Service shall be made: (1) On Individual. On an individual, including an incompetent person not having a legally appointed guardian, by delivering a copy of the order and the petition personally to the individual or by leaving a copy of the order and the petition at the individual's dwelling house or usual place of abode with some person at least 18 years of age residing therein, or by delivering a copy of the order and the petition to an agent authorized by appointment or required by law to receive service of process; (2) On Guardian. On an incompetent person who has a legally appointed guardian, by delivering a copy of the order and the petition to the guardian personally.

Service may be made by an officer or deputy authorized by law to serve process in civil actions within the state or territory where such service is made.

Service may be made in any state or territory in the United States. If served in a territory, substitute the word "territory" for the word "state."

If service is made outside of Missouri, the officer making the service must swear an affidavit before the clerk, deputy clerk, or judge of the court of which the person is an officer or other person authorized to administer oaths. This affidavit must state the time, place, and manner of service, the official character of the affiant, and the affiant's authority to serve process in civil actions within the state or territory where service is made.

The return should be made promptly.



Petition for Order of Protection – Child

Notice to Petitioner: Respondent will receive a copy of this petition with service.

Use this form when six to ten children are involved with this case. Use CP40 for one child and CP42 for two to five children.

Judge or Division:	Case Number:
	Court ORI Number:
Petitioner:	MSHP Number:
Protected Child 1: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Responsible Law Enforcement ORI:
Protected Child 2: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Related Cases: _____ (Date File Stamp)
Protected Child 3: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Children’s Relationship to Respondent pursuant to 18 U.S.C. §§ 921(a)(32) and 922(g)(8) determination:
Protected Child 4: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child’s Relationship to Respondent (Child 1): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Protected Child 5: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child’s Relationship to Respondent (Child 2): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Protected Child 6: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child’s Relationship to Respondent (Child 3): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Protected Child 7: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child’s Relationship to Respondent (Child 4): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Protected Child 8: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child’s Relationship to Respondent (Child 5): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Protected Child 9: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child’s Relationship to Respondent (Child 6): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Protected Child 10: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child’s Relationship to Respondent (Child 7): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
vs.	
Respondent:	Protected Child’s Relationship to Respondent (Child 8): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Alias/Nicknames:	Protected Child’s Relationship to Respondent (Child 9): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Respondent’s DOB: Age: SSN (if known, last four digits): Race: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Hair Color: Height: Eye Color: Weight: (Identifying Information for use by Law Enforcement) Visible Identifying Marks (e.g., tattoos, birthmarks, braces, mustache, beard, pierced ear, glasses):	Protected Child’s Relationship to Respondent (Child 10): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
	Respondent’s Home Address:
	Home Phone Number:
	Respondent’s Work Address:
	Work Phone Number: Work Hours:
	Other Locations Where Respondent May Be Served:

I. PROTECTED CHILDREN INFORMATION

Complete questions 1 – 7 for each protected child.

Protected Child 1:

1. I am Petitioner and the: (check appropriate boxes)

- parent or guardian of the child.
- guardian ad litem for the child.
- court appointed special advocate for the child.
- juvenile officer.

2. Respondent is:

- a household member who is residing with the child.
- a household member who resided with the child in the past.
- an emancipated child who is residing with the child.
- an emancipated child who resided with the child in the past.
- stalking the child.
- a household member under 18 who is residing with the child.
- a household member under 18 who resided with the child.
- a person under 18 stalking the child.
- sexually assaulting the child.

3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address)
_____ (city) _____ (County/City of St. Louis), MO.

3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)

4. There are no prior or pending custody orders for this child.
 There is a prior or pending custody order for this child.

5. The family home of the child is: (check appropriate boxes)

- owned leased rented

By: Respondent Petitioner Other (name) _____

Occupied by: (include name only if different from above) _____.

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

- caused or attempted to cause physical harm to the child
- placed or attempted to place the child in apprehension of immediate physical harm
- coerced the child
- stalked the child
- harassed the child
- sexually assaulted the child
- unlawfully imprisoned the child
- followed the child from place to place
- abused the child's pet(s)
- threatened to do any of the above

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

7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because:
(describe)

Protected Child 2:

1. I am Petitioner and the: (check appropriate boxes)

- parent or guardian of the child.
- guardian ad litem for the child.
- court appointed special advocate for the child.
- juvenile officer.

2. Respondent is:

- a household member who is residing with the child.
- a household member who resided with the child in the past.
- an emancipated child who is residing with the child.
- an emancipated child who resided with the child in the past.
- stalking the child.
- a household member under 18 who is residing with the child.
- a household member under 18 who resided with the child.
- a person under 18 stalking the child.
- sexually assaulting the child.

3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address)
_____ (city) _____ (County/City of St. Louis), MO.

3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)

4. There are no prior or pending custody orders for this child.
 There is a prior or pending custody order for this child.

5. The family home of the child is: (check appropriate boxes)

owned leased rented

By: Respondent Petitioner Other (name) _____

Occupied by: (include name only if different from above) _____

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

- | | |
|--|---|
| <input type="checkbox"/> caused or attempted to cause physical harm to the child | <input type="checkbox"/> sexually assaulted the child |
| <input type="checkbox"/> placed or attempted to place the child in apprehension of immediate physical harm | <input type="checkbox"/> unlawfully imprisoned the child |
| <input type="checkbox"/> coerced the child | <input type="checkbox"/> followed the child from place to place |
| <input type="checkbox"/> stalked the child | <input type="checkbox"/> abused the child's pet(s) |
| <input type="checkbox"/> harassed the child | <input type="checkbox"/> threatened to do any of the above |

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

7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because: (describe)

Protected Child 3:

1. I am Petitioner and the: (check appropriate boxes)

- parent or guardian of the child.
 guardian ad litem for the child.
 court appointed special advocate for the child.
 juvenile officer.

2. Respondent is:

- | | |
|---|--|
| <input type="checkbox"/> a household member who is residing with the child. | <input type="checkbox"/> a household member under 18 who is residing with the child. |
| <input type="checkbox"/> a household member who resided with the child in the past. | <input type="checkbox"/> a household member under 18 who resided with the child. |
| <input type="checkbox"/> an emancipated child who is residing with the child. | <input type="checkbox"/> a person under 18 stalking the child. |
| <input type="checkbox"/> an emancipated child who resided with the child in the past. | <input type="checkbox"/> sexually assaulting the child. |
| <input type="checkbox"/> stalking the child. | |

3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address)
_____ (city) _____ (County/City of St. Louis), MO.

3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)

4. There are no prior or pending custody orders for this child.
 There is a prior or pending custody order for this child.

5. The family home of the child is: (check appropriate boxes)

owned leased rented

By: Respondent Petitioner Other (name) _____

Occupied by: (include name only if different from above) _____

6. Respondent has knowingly and intentionally: (check at least one)
- | | |
|--|---|
| <input type="checkbox"/> caused or attempted to cause physical harm to the child | <input type="checkbox"/> sexually assaulted the child |
| <input type="checkbox"/> placed or attempted to place the child in apprehension of immediate physical harm | <input type="checkbox"/> unlawfully imprisoned the child |
| <input type="checkbox"/> coerced the child | <input type="checkbox"/> followed the child from place to place |
| <input type="checkbox"/> stalked the child | <input type="checkbox"/> abused the child's pet(s) |
| <input type="checkbox"/> harassed the child | <input type="checkbox"/> threatened to do any of the above |
- by the following acts: (Include the most recent date(s) of the acts described.)

7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because: (describe)

Protected Child 4:

1. I am Petitioner and the: (check appropriate boxes)
- | | |
|--|--|
| <input type="checkbox"/> parent or guardian of the child. | |
| <input type="checkbox"/> guardian ad litem for the child. | |
| <input type="checkbox"/> court appointed special advocate for the child. | |
| <input type="checkbox"/> juvenile officer. | |
2. Respondent is:
- | | |
|---|--|
| <input type="checkbox"/> a household member who is residing with the child. | <input type="checkbox"/> a household member under 18 who is residing with the child. |
| <input type="checkbox"/> a household member who resided with the child in the past. | <input type="checkbox"/> a household member under 18 who resided with the child. |
| <input type="checkbox"/> an emancipated child who is residing with the child. | <input type="checkbox"/> a person under 18 stalking the child. |
| <input type="checkbox"/> an emancipated child who resided with the child in the past. | <input type="checkbox"/> sexually assaulting the child. |
| <input type="checkbox"/> stalking the child. | |
3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address) _____ (city) _____ (County/City of St. Louis), MO.
- 3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)
4. There are no prior or pending custody orders for this child.
 There is a prior or pending custody order for this child.
5. The family home of the child is: (check appropriate boxes)
- | | | |
|--------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> owned | <input type="checkbox"/> leased | <input type="checkbox"/> rented |
|--------------------------------|---------------------------------|---------------------------------|
- By: Respondent Petitioner Other (name) _____
- Occupied by: (include name only if different from above) _____.
6. Respondent has knowingly and intentionally: (check at least one)
- | | |
|--|---|
| <input type="checkbox"/> caused or attempted to cause physical harm to the child | <input type="checkbox"/> sexually assaulted the child |
| <input type="checkbox"/> placed or attempted to place the child in apprehension of immediate physical harm | <input type="checkbox"/> unlawfully imprisoned the child |
| <input type="checkbox"/> coerced the child | <input type="checkbox"/> followed the child from place to place |
| <input type="checkbox"/> stalked the child | <input type="checkbox"/> abused the child's pet(s) |
| <input type="checkbox"/> harassed the child | <input type="checkbox"/> threatened to do any of the above |
- by the following acts: (Include the most recent date(s) of the acts described.)

7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because: (describe)

Protected Child 5:

1. I am Petitioner and the: (check appropriate boxes)

- parent or guardian of the child.
- guardian ad litem for the child.
- court appointed special advocate for the child.
- juvenile officer.

2. Respondent is:

- a household member who is residing with the child.
- a household member who resided with the child in the past.
- an emancipated child who is residing with the child.
- an emancipated child who resided with the child in the past.
- stalking the child.
- a household member under 18 who is residing with the child.
- a household member under 18 who resided with the child.
- a person under 18 stalking the child.
- sexually assaulting the child.

3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address) _____ (city) _____ (County/City of St. Louis), MO.

3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)

- 4. There are no prior or pending custody orders for this child.
- There is a prior or pending custody order for this child.

5. The family home of the child is: (check appropriate boxes)

- owned leased rented

By: Respondent Petitioner Other (name) _____

Occupied by: (include name only if different from above) _____

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

- caused or attempted to cause physical harm to the child
- placed or attempted to place the child in apprehension of immediate physical harm
- coerced the child
- stalked the child
- harassed the child
- sexually assaulted the child
- unlawfully imprisoned the child
- followed the child from place to place
- abused the child's pet(s)
- threatened to do any of the above

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

7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because: (describe)

Protected Child 6:

1. I am Petitioner and the: (check appropriate boxes)

- parent or guardian of the child.
- guardian ad litem for the child.
- court appointed special advocate for the child.
- juvenile officer.

2. Respondent is:
- | | |
|---|--|
| <input type="checkbox"/> a household member who is residing with the child. | <input type="checkbox"/> a household member under 18 who is residing with the child. |
| <input type="checkbox"/> a household member who resided with the child in the past. | <input type="checkbox"/> a household member under 18 who resided with the child. |
| <input type="checkbox"/> an emancipated child who is residing with the child. | <input type="checkbox"/> a person under 18 stalking the child. |
| <input type="checkbox"/> an emancipated child who resided with the child in the past. | <input type="checkbox"/> sexually assaulting the child. |
| <input type="checkbox"/> stalking the child. | |
3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address)
 _____ (city) _____ (County/City of St. Louis), MO.
- 3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)
4. There are no prior or pending custody orders for this child.
 There is a prior or pending custody order for this child.
5. The family home of the child is: (check appropriate boxes)
 owned leased rented
- By: Respondent Petitioner Other (name) _____
- Occupied by: (include name only if different from above) _____
6. Respondent has knowingly and intentionally: (check at least one)
- | | |
|--|---|
| <input type="checkbox"/> caused or attempted to cause physical harm to the child | <input type="checkbox"/> sexually assaulted the child |
| <input type="checkbox"/> placed or attempted to place the child in apprehension of immediate physical harm | <input type="checkbox"/> unlawfully imprisoned the child |
| <input type="checkbox"/> coerced the child | <input type="checkbox"/> followed the child from place to place |
| <input type="checkbox"/> stalked the child | <input type="checkbox"/> abused the child's pet(s) |
| <input type="checkbox"/> harassed the child | <input type="checkbox"/> threatened to do any of the above |
- by the following acts: (Include the most recent date(s) of the acts described.)
7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because: (describe)

Protected Child 7:

1. I am Petitioner and the: (check appropriate boxes)
- | | |
|--|--|
| <input type="checkbox"/> parent or guardian of the child. | |
| <input type="checkbox"/> guardian ad litem for the child. | |
| <input type="checkbox"/> court appointed special advocate for the child. | |
| <input type="checkbox"/> juvenile officer. | |
2. Respondent is:
- | | |
|---|--|
| <input type="checkbox"/> a household member who is residing with the child. | <input type="checkbox"/> a household member under 18 who is residing with the child. |
| <input type="checkbox"/> a household member who resided with the child in the past. | <input type="checkbox"/> a household member under 18 who resided with the child. |
| <input type="checkbox"/> an emancipated child who is residing with the child. | <input type="checkbox"/> a person under 18 stalking the child. |
| <input type="checkbox"/> an emancipated child who resided with the child in the past. | <input type="checkbox"/> sexually assaulting the child. |
| <input type="checkbox"/> stalking the child. | |
3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address)
 _____ (city) _____ (County/City of St. Louis), MO.
- 3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)
4. There are no prior or pending custody orders for this child.
 There is a prior or pending custody order for this child.

5. The family home of the child is: (check appropriate boxes)
 owned leased rented
 By: Respondent Petitioner Other (name) _____
 Occupied by: (include name only if different from above) _____.
6. Respondent has knowingly and intentionally: (check at least one)
 caused or attempted to cause physical harm to the child sexually assaulted the child
 placed or attempted to place the child in apprehension of immediate physical harm unlawfully imprisoned the child
 coerced the child followed the child from place to place
 stalked the child abused the child's pet(s)
 harassed the child threatened to do any of the above
 by the following acts: (Include the most recent date(s) of the acts described.)
7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because:
 (describe)

Protected Child 8:

1. I am Petitioner and the: (check appropriate boxes)
 parent or guardian of the child.
 guardian ad litem for the child.
 court appointed special advocate for the child.
 juvenile officer.
2. Respondent is:
 a household member who is residing with the child. a household member under 18 who is residing with the child.
 a household member who resided with the child in the past. a household member under 18 who resided with the child.
 an emancipated child who is residing with the child. a person under 18 stalking the child.
 an emancipated child who resided with the child in the past. sexually assaulting the child.
 stalking the child.
3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address)
 _____ (city) _____ (County/City of St. Louis), MO.
- 3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)
4. There are no prior or pending custody orders for this child.
 There is a prior or pending custody order for this child.
5. The family home of the child is: (check appropriate boxes)
 owned leased rented
 By: Respondent Petitioner Other (name) _____
 Occupied by: (include name only if different from above) _____.
6. Respondent has knowingly and intentionally: (check at least one)
 caused or attempted to cause physical harm to the child sexually assaulted the child
 placed or attempted to place the child in apprehension of immediate physical harm unlawfully imprisoned the child
 coerced the child followed the child from place to place
 stalked the child abused the child's pet(s)
 harassed the child threatened to do any of the above
 by the following acts: (Include the most recent date(s) of the acts described.)

7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because: (describe)

Protected Child 9:

1. I am Petitioner and the: (check appropriate boxes)

- parent or guardian of the child.
- guardian ad litem for the child.
- court appointed special advocate for the child.
- juvenile officer.

2. Respondent is:

- a household member who is residing with the child.
- a household member who resided with the child in the past.
- an emancipated child who is residing with the child.
- an emancipated child who resided with the child in the past.
- stalking the child.
- a household member under 18 who is residing with the child.
- a household member under 18 who resided with the child.
- a person under 18 stalking the child.
- sexually assaulting the child.

3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address) _____ (city) _____ (County/City of St. Louis), MO.

3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)

- 4. There are no prior or pending custody orders for this child.
- There is a prior or pending custody order for this child.

5. The family home of the child is: (check appropriate boxes)

- owned leased rented

By: Respondent Petitioner Other (name) _____

Occupied by: (include name only if different from above) _____

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

- caused or attempted to cause physical harm to the child
- placed or attempted to place the child in apprehension of immediate physical harm
- coerced the child
- stalked the child
- harassed the child
- sexually assaulted the child
- unlawfully imprisoned the child
- followed the child from place to place
- abused the child's pet(s)
- threatened to do any of the above

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

7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because: (describe)

Protected Child 10:

1. I am Petitioner and the: (check appropriate boxes)

- parent or guardian of the child.
- guardian ad litem for the child.
- court appointed special advocate for the child.
- juvenile officer.

2. Respondent is:
- | | |
|---|--|
| <input type="checkbox"/> a household member who is residing with the child. | <input type="checkbox"/> a household member under 18 who is residing with the child. |
| <input type="checkbox"/> a household member who resided with the child in the past. | <input type="checkbox"/> a household member under 18 who resided with the child. |
| <input type="checkbox"/> an emancipated child who is residing with the child. | <input type="checkbox"/> a person under 18 stalking the child. |
| <input type="checkbox"/> an emancipated child who resided with the child in the past. | <input type="checkbox"/> sexually assaulting the child. |
| <input type="checkbox"/> stalking the child. | |
3. The act(s) of domestic violence, stalking, or sexual assault occurred at _____ (address)
_____ (city) _____ (County/City of St. Louis), MO.
- 3.a. The county in which this petition is being filed is where the protected child lives respondent may be served act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)
4. There are no prior or pending custody orders for this child.
 There is a prior or pending custody order for this child.
5. The family home of the child is: (check appropriate boxes)
 owned leased rented
 By: Respondent Petitioner Other (name) _____
 Occupied by: (include name only if different from above) _____.
6. Respondent has knowingly and intentionally: (check at least one)
- | | |
|--|---|
| <input type="checkbox"/> caused or attempted to cause physical harm to the child | <input type="checkbox"/> sexually assaulted the child |
| <input type="checkbox"/> placed or attempted to place the child in apprehension of immediate physical harm | <input type="checkbox"/> unlawfully imprisoned the child |
| <input type="checkbox"/> coerced the child | <input type="checkbox"/> followed the child from place to place |
| <input type="checkbox"/> stalked the child | <input type="checkbox"/> abused the child's pet(s) |
| <input type="checkbox"/> harassed the child | <input type="checkbox"/> threatened to do any of the above |
- by the following acts: (Include the most recent date(s) of the acts described.)
7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because:
(describe)

II. RESPONDENT INFORMATION

8. Respondent is at least 18 years of age or emancipated under 18.
9. Respondent may be found in _____ (city),
_____ (state), in the County of _____.

III. CUSTODY

The court cannot change custody if a prior order regarding custody is pending or has been made.

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

<u>Child's Name</u>	<u>Relationship to Parties</u>	<u>Person to Receive Custody</u>	<u>Temporary</u>	<u>Full</u>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

11. Indicate any prior or pending custody court cases before, or orders entered by, this court or any other court involving the following parties.

(If none, so state):

- a. Petitioner: _____
- b. Respondent: _____
- c. Children (identified in item 10): _____

12. Award visitation with the children as follows:

IV. PETITIONER'S REQUESTS

13. Pursuant to chapter 455, RSMo, it is requested that the court issue an Ex Parte Order of Protection restraining Respondent from: (check boxes that apply)

- Committing or threatening to commit domestic violence, stalking, sexual assault, molesting, or disturbing the peace of the protected children.
- Abusing or threatening to abuse the protected children's pet(s).
- Having any contact with the protected children, except as specifically authorized by this Order.
- Entering the family home of the protected children, located at _____.
- Entering the place(s) of employment or school(s) of the protected children, located at _____.
- Communicating with the protected children in any manner or through any medium.
- Coming within _____ (feet) of the protected children.
- Other:

14. It is further requested that the Ex Parte Order of Protection exclude Respondent from the family home of the protected children because:
- It is in the best interest of the children to remain in the home;
 - A substantial risk to the children exists unless Respondent is excluded;
 - A remaining adult family or household member is able to care adequately for the children in the absence of Respondent; and
 - A commitment has been obtained from the Children's Division to provide appropriate social services to the family or household members during the period of time during which an Order of Protection is in effect.

15. Exclusion of Respondent from the family home of the protected children is not being requested.

Additional Requests:

16. It is further requested that, upon the hearing of this cause, the court also issue a Full Order of Protection - Child enjoining Respondent from the above acts for such time as is necessary to protect the children and that the court:

- Order Respondent not to commit or threaten to commit domestic violence, stalking, sexual assault, molesting, or disturbing the peace of the protected children, or abusing a pet.
- Order Respondent not to have any contact with the protected children except as specifically authorized by this order.
- Order Respondent not to enter the family home, place of employment or school of the protected children except as specifically authorized by this order.
- Award custody of the protected children to _____.

Child Support/Maintenance

17. Order Respondent to pay child support in the amount of \$ _____ (check one) per week per month.
18. Order Respondent to pay maintenance in the amount of \$ _____ (check one) per week per month.

Other Support

19. Order Respondent to make or continue to make the rent or mortgage payments to the residence occupied by the protected children in the amount of \$ _____ per week per month.
20. Order Respondent to pay a reasonable fee for housing and other services provided to the protected children by a shelter for victims of domestic violence.
21. Order Respondent to pay the cost of medical treatment or services provided to protected children as a result of injuries sustained by an act of domestic violence committed by Respondent.

Counseling/Treatment

22. Order Respondent to participate in a court-approved counseling program designed to help batterers stop violent behavior or a substance abuse program.

Costs/Fees

23. Order Respondent to pay court costs.
24. Order Respondent to pay Petitioner's attorney fees.

Other

25. Order the full order of protection issued for one year be automatically renewed unless Respondent requests a hearing at least 30 days prior to the expiration of the order.
26. Petitioner to receive wireless telephone number(s) and billing responsibilities from Respondent. (Note: If checked, complete the Wireless Telephone Number Transfer Addendum form.)
27. Award possession and care of any pet(s), along with any moneys necessary to cover medical costs that may have resulted from abuse of the pet(s).

- 28. I believe that revealing my address will endanger myself or the protected children. (Note: If checked, complete the Child Protection Petitioner and Protected Child Information (Confidential Record) form.)
- 29. Order Petitioner's residential address on voter's registration record be closed to the public.
- 30. Other (specify):

V. PETITIONER'S SIGNATURE

I swear/affirm under penalty of perjury that these facts are true according to my best knowledge and belief.
I understand that a copy of this petition will be served on Respondent.

_____ Date

/s/ _____
 Petitioner's Signature

_____ Address (Optional)

_____ City, State and Zip

_____ Telephone

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

_____ Address

_____ City, State and Zip

_____ Telephone

NOTICE: Section 455.510.3, RSMo, provides that a petitioner seeking protection under the Child Protection Orders Act is not required to reveal any current address or place of residence of the children on this petition. **Do not provide this information if doing so will endanger the children.**

Notice to Respondent

You are notified that any full order of protection granted under sections 455.500 to 455.538, RSMo, shall be to protect the victim from domestic violence, including danger to the child's pet(s), stalking, and sexual assault. If the court finds in favor of Petitioner, whether you appear or not, the court may grant such forms of relief necessary to ensure the child victim's safety, including but not limited to:

1. Temporarily enjoining you from committing domestic violence or sexual assault, threatening to commit domestic violence or sexual assault, stalking, molesting, or disturbing the peace of the protected child(ren), including abusing or threatening to abuse a pet;
2. Temporarily enjoining you from entering the family home of the protected child(ren), except as specifically authorized by the court;
3. Temporarily enjoining you from communicating with the protected child(ren) in any manner or through any medium, except as specifically authorized by the court;
4. Award custody of the minor child(ren);
5. Award visitation;
6. Award child support;
7. Award maintenance to Petitioner;
8. Order you to pay or to continue to pay rent or mortgage payments on a residence occupied by the protected child(ren) if you have a duty to support the protected child(ren) or other dependent household members;
9. Order you to participate in a court-approved counseling program designed to help stop violent behavior or to treat substance abuse;
10. Order you to pay the costs of your treatment and the treatment of the protected child(ren);
11. Order you to pay a reasonable fee for housing and other services provided to the protected child(ren) by a shelter for victims of domestic violence;
12. Order a wireless service provider to transfer the billing responsibility for and rights to the wireless telephone number or numbers of any minor children in Petitioner's care to Petitioner, if Petitioner is not the wireless service accountholder.
13. Award possession and care of any pet, along with any moneys necessary to cover medical costs that may have resulted from abuse of the pet;
14. Order you to make an assignment of wages of earnings or other income;
15. Order you to pay court costs;
16. Order you to pay Petitioner's attorney fees, including sums for legal services.

A Full Order of Protection could last up to three years.

*****CONFIDENTIAL INFORMATION FOR LAW ENFORCEMENT EYES ONLY*****

GREENE COUNTY, MISSOURI EX PARTE SERVICE INFORMATION FORM

CASE NUMBER: _____

Petitioner's Telephone Number

Day _____ Night _____

Please answer the following questions to the best of your ability. Your answers may aid in locating the Respondent for service. **Please check the box indicating where the Respondent is most likely to be served.**

- Respondent's place of employment _____
 - Days worked and best hours for service _____
- Residential address where Respondent may be served _____
 - Name and phone number of owner of residence _____
 - Indications Respondent is present (i.e. Make, model and color of vehicle in drive) _____
 - Time and Days Respondent may be found there _____
- Places frequented (days and time) by Respondent (i.e. friend's house, clubs, restaurants, places of business) _____

RESPONDENT'S DESCRIPTION
(May attach photo)

Height _____ Weight _____ Hair Color _____ Sex _____ Race _____
Complexion _____ Facial Hair _____
Date of Birth _____ Age _____ Other marks _____

ADDITIONAL INFORMATION

Is Respondent in a jail or due in Court on a certain date, does the Respondent have a Probation Officer, or does Respondent have any other type of appointment where he/she can be served?

- This form was utilized by Law Enforcement to serve Respondent
Officer Notes:

THIS FORM SHOULD BE RETURNED TO THE GREENE COUNTY CIRCUIT CLERK'S OFFICE WITH COMPLETED RETURN