

5. The following persons should also be on this Order. As stated in number 4, the Defendant is a danger to them (list name(s) and date of birth):

_____ (___/___/___) _____ (___/___/___)

_____ (___/___/___) _____ (___/___/___)

6. Defendant should be ordered to stay away from these locations, at all times, even when I am not present (list address if selected):

Home _____

Work _____

School/Others _____

7. If checked, because of the risk of harm, order the Defendant NOT to possess firearms or ammunition.

8. If checked, request an order for the Defendant to participate in domestic violence counseling or other counseling.

9. Other: _____

Under penalty of perjury, I swear or affirm the above statements are true to the best of my knowledge, and I request an Order/Injunction granting relief as allowed by law.

Plaintiff

Attest: _____
Clerk/Notary

___/___/___
Date