

**KEN BURKE, PINELLAS COUNTY CLERK OF THE CIRCUIT COURT AND COMPTROLLER**

Today's Date: \_\_\_\_\_ Case Number: \_\_\_\_\_

( ) DOMESTIC ( ) REPEAT or ( ) STALKING VIOLENCE

Please check off the type being filed

**CLERK'S INFORMATION SHEET**

**Please read:** This is an information sheet to assist the Clerk in preparing your Petition for Injunction for Protection Against Domestic, Repeat or Stalking Violence. You are the *Petitioner*; the individual against whom you are filing is the *Respondent*. Please fill in all information below completely and to the best of your knowledge. Please be advised that the penalties and fines for knowingly making false statements on a petition are as follows:

Perjury (Making False Statements): A criminal offense; guilty of a misdemeanor of the 2<sup>nd</sup> Degree.

Penalties and Fines for Perjury:

- F.S. 775.082(4) (b): For a Misdemeanor of the 2<sup>nd</sup> Degree, a definite term of imprisonment not exceeding 60 days.
- F.S. 775.083(1) (e): \$500.00 fine.

**NOTE:** If the Respondent *does not* know your address, you may request a **confidential filing** of your address. Write "**Confidential**" on the lines below where your contact information is requested.

**Petitioner's Name:** \_\_\_\_\_

First Middle Last Suffix

Alias/ Former Name (if any): \_\_\_\_\_

First Middle Last Suffix

Complete Address: \_\_\_\_\_

Street City State Zip Code

Telephone: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

**Respondent's Name:** \_\_\_\_\_

First Middle Last Suffix

Alias/ Former Name (if any): \_\_\_\_\_

First Middle Last Suffix

Complete Address: \_\_\_\_\_

Street City State Zip Code

Respondent's Place of Employment: \_\_\_\_\_

Place of Employment Address: \_\_\_\_\_

Street City State Zip Code

Date of Birth: \_\_\_\_\_

Is the Respondent Incarcerated?  YES  NO If Yes, Where: \_\_\_\_\_

Is either party a member of the armed forces (active, reserve or guard)?  YES  NO

If yes, indicate which party is a member of the armed forces:  Petitioner  Respondent

1) Is the person you are seeking protection from your:

- Spouse  Former Spouse  Dating, how long? \_\_\_\_\_  Roommate  
 Boyfriend  Former Boyfriend  Intimate Partner  Neighbor  
 Girlfriend  Former Girlfriend  Related by marriage

If question 1 does not apply, please state how you have come into contact with the person you are requesting an Injunction for Protection (Restraining Order) against.

1) Have you ever lived together or do you now share the same single family dwelling unit with the person you are requesting the Restraining Order against?

- YES (have lived together)  NO (never lived together)

2) If Stalking Violence, do you believe that you are a victim of stalking because the Respondent has willfully, maliciously, and repeatedly (check all that apply to you):

- Followed  Harassed  Cyberstalked

3) Are you now, or have you ever been involved in any court action with the defendant/respondent?  YES  NO

If yes, please explain briefly: \_\_\_\_\_

4) Are you aware of any Restraining Orders now in effect against the defendant/respondent?

- YES  NO

5) The last episode of abuse took place: \_\_\_\_\_ Date: \_\_\_\_\_

6) Do you genuinely fear being hurt by the respondent?  YES  NO

7) Are you the Custodian of any minor (under 18 years of age) child or children?  YES  NO  
If yes, please list their name, age and date of birth:

\_\_\_\_\_ Date of birth: \_\_\_\_\_

\_\_\_\_\_ Date of birth: \_\_\_\_\_

\_\_\_\_\_ Date of birth: \_\_\_\_\_

\_\_\_\_\_ Date of birth: \_\_\_\_\_

\_\_\_\_\_ Date of birth: \_\_\_\_\_

8) Is the Respondent the natural parent of any of the child or children listed above?

- YES  NO

If no, please *circle* the name of the child or children listed above who are not children of you and the Respondent.

**Please see the clerk once you have completed this form or should you have any questions.**