

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 2nd Degree.

Penalties and Fines for Perjury:

- F.S. 775.082(4) (b): For a Misdemeanor of the 2nd 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: _____
 Date of Birth: _____

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 or Former Spouse or Boyfriend
 Related by Marriage or Blood Relation or Girlfriend

2) 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.

3) 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)

4) 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

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

If yes, please explain briefly: _____

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

- YES NO

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

8) 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: _____

9) 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.