**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.**