| OURTS OF ARIZONA - NAME OF COURT Street Address City | | | | | | y, Arizona Zip Co | , Arizona Zip Code Phone Number | | | |
|--|---|------------------------|--------------------|------------------|------------------|------------------------|---|--|--|--|
| | | | | | | | PETITION | | | |
| Plaintiff | | | Defendant | | | FOR INJUNCTION AGAINST | | | | |
| Date of Birth | | | Address | | | | HARASSMENT MODIFIED | | | |
| | | | City, State, Zip | Code | | | Case Number | | | |
| | | | Telephone | | | | | | | |
| | NOTE: FEES | S MAY BE WA | AIVED OR DEF | ERRED IF YO | OU ARE UNA | BLE TO PAY | | | | |
| | 1(012(122) | 9 IVIII 1921 VVI | II (ED ON DEI | | ye mile en in | | | | | |
| . My relationsh | nip to the defendant is | :: | | | | | | | | |
| | nvolves a series of act ve been harassed by th | | | | | | een incarcerated or out te date for each | | | |
| Date(s) | Describe w | Describe what happened | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| | s there been any court name of court, facts o | | rder that involves | s similar conduc | t by you and/o | r the Defendant? | G No G Yes: If | | | |
| . If the Court d | loes not grant your rec | quest today, with | hout notice to the | Defendant, wh | at serious harn | n may occur: | | | | |
| | | | | | | | | | | |
| | art to order the Defend D make the following | | | | me and/or person | ons named below | and/or against my | | | |
| G Waive or o | defer any fees. | | | | | | | | | |
| G Order the | Defendant not to cont | act me: G in | person; G by j | phone; G in w | riting; G | | | | | |
| | | | | | | | | | | |
| DESCRIPTION SEX | OF DEFENDANT RACE | DATE OF BIRTH | HEIGHT | WEIGHT | EYES | HAIR | SOC.SEC.NO. | | | |
| | | | | | | | | | | |
| | |] | |] | | | | | | |

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DO NOT FILL OUT ADDRESSES AND/OR PHONE NUMBERS BELOW IF YOU WANT THEM KEPT PRIVATE

The following persons should be included within the protection of this Order for the following reasons:

| Name and Address if different than yours (do not include yourself) | Relationship to you | D.O.B | Reason(s) | | | | | | |
|--|------------------------|-------------------------------|----------------|------|--|--|--|--|--|
| Name: | | | | | | | | | |
| Address: | | | | | | | | | |
| City/State/Zip: | | | | | | | | | |
| Name: | | | | _ | | | | | |
| Address: | | | | | | | | | |
| City/State/Zip: | | | | | | | | | |
| Name: | | | | | | | | | |
| Address: | | | | | | | | | |
| City/State/Zip: | | | | | | | | | |
| G Order the Defendant not to come on or near (LEAVE NEXT LINE BLANK IF BOX ABOVE IS CHECKED): G My residence at: G My place of employment (Name and Address): Does the Defendant also work there? G Yes G No G School (Name and Address): G Other address: G Other requests: | | | | | | | | | |
| My Signature Da | te | Attorn | ey's Signature | Date | | | | | |
| <u>VERIFICATION</u> I swear or affirm that the contents of this Petition are true to the best of my knowledge. | | | | | | | | | |
| | Plaintiff or | Third Party | | Date | | | | | |
| SUBSCRIBED AND SWORN to before me on | Judicial Of | Judicial Officer/Clerk/Notary | | | | | | | |

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