



# INFORMATION EXCLUDED

Petition for Order of Protection

Case # \_\_\_\_\_

Do you want your home and business addresses excluded from the documents when filed?

\_\_\_\_\_ YES

\_\_\_\_\_ NO

\_\_\_\_\_  
Print Petitioner's Name

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Signature

✓

# ATTENTION:

**Legal Aid of Arkansas receives a grant to provide an attorney to qualifying Petitioners in Order of Protection cases free of charge.**

**Legal Aid of Arkansas is prohibited from contacting you directly without your permission. If you would like Legal Aid of Arkansas to represent you in your Order of Protection case, please:**

**1) Call, or go online to apply for services**

**1-800-952-9243**

**Monday-Thursday 9-11 a.m. and 1-3 p.m.**

**Tuesday evening 5:15-7:15**

**<http://www.arlawhelp.org>**

**OR**

**2) Complete the following (be aware your abuser may have access to this information. Please check with the clerk to make sure it is not filed in the court file):**

I \_\_\_\_\_ *(printed name)*, authorize  
Legal Aid of Arkansas to contact me about my Order of Protection case. I can be reached at  
the following telephone number \_\_\_\_\_ or  
by email at \_\_\_\_\_.

*I understand that signing this form does not create an attorney-client relationship. I must qualify for services and accepted as a client by Legal Aid of Arkansas.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# NOTICE

You may be assessed \$215.00 for service and filing fees, if the allegations of abuse are determined after a hearing to be false or for other reasons the Judge may order.

---

Print Petitioner's Name

---

Petitioner's Signature



**COVER SHEET  
STATE OF ARKANSAS  
CIRCUIT COURT: DOMESTIC RELATIONS**

The domestic relations reporting form and the information contained herein shall not be admissible as evidence in any other court proceeding or replace or supplement the filing and service of pleadings, orders, or other papers as required by law of Supreme Court Rule. This form is required pursuant to Administrative Order Number 8. Instructions are located at [www.courts.arkansas.gov](http://www.courts.arkansas.gov).

**County:** \_\_\_\_\_ **District:** \_\_\_\_\_ **Filing Date:** \_\_\_\_\_

**Judge:** \_\_\_\_\_ **Division:** \_\_\_\_\_ **Case ID:** \_\_\_\_\_

**Type of Case (select only one):**

- (AN) Annulment (marriage date: \_\_\_\_\_)       (PT) Paternity
- (CT) Contempt-Domestic Relations                       (SM) Separate Maintenance (marriage date: \_\_\_\_\_)
- (CS) Custody     (SS) Support (OCSE)
- (DV) Divorce (marriage date: \_\_\_\_\_)               (ST) Support-Private (non-OCSE)
- (FJ) Foreign Judgment-Domestic Relations               (SU) Support-UIFSA
- (DA) Order of Protection     (VI) Visitation

**Does this case involve the custody or support of minor children?**     Yes     No

*If yes, also file the completed Confidential Information Sheet.*

Plaintiff		Defendant	
Last Name		Last Name	
Suffix		Suffix	
First Name		First Name	
DL/State ID		DL/State ID	
Address		Address	
City, State, ZIP		City, State, ZIP	
Phone		Phone	
Email		Email	
Self-represented	<input type="checkbox"/> Yes <input type="checkbox"/> No	Self-represented	<input type="checkbox"/> Yes <input type="checkbox"/> No
DOB		DOB	
Interpreter needed?	<input type="checkbox"/> Yes: _____ <input type="checkbox"/> No                      (language)	Interpreter needed?	<input type="checkbox"/> Yes: _____ <input type="checkbox"/> No                      (language)

**Attorney of Record:** \_\_\_\_\_ **Bar #:** \_\_\_\_\_

For the:     Plaintiff     Defendant                      **Email Address:** \_\_\_\_\_

**Related Case(s):** Judge: \_\_\_\_\_ **Case ID(s):** \_\_\_\_\_

- Manner of filing:**
- (MFO) Original     (MFR+case type) Re-open
  - (MFT) Transfer     (MFF) Reactivate

6/1/2017

CONFIDENTIAL INFORMATION FOR USE ONLY BY THOSE AUTHORIZED BY  
Arkansas Code Annotated 9-14-205

Custodial Parent/Custodian: \_\_\_\_\_

Residential Addr: \_\_\_\_\_  
(Street) (City) (St) (Zip)

Mailing Addr: \_\_\_\_\_  
(Street or PO Box) (City) (St) (Zip)

Phone Numbers: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ DOB: \_\_\_\_\_

Driver's License Number: (State) \_\_\_\_\_ (Number) \_\_\_\_\_

Employer's Name or Business: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street or PO Box) (City) (St) (Zip)

Non-Custodial Parent: \_\_\_\_\_

Residential Addr: \_\_\_\_\_  
(Street) (City) (St) (Zip)

Mailing Addr: \_\_\_\_\_  
(Street or PO Box) (City) (St) (Zip)

Phone Numbers: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ DOB: \_\_\_\_\_

Driver's License Number: (State) \_\_\_\_\_ (Number) \_\_\_\_\_

Employer's Name or Business: \_\_\_\_\_  
(Street or PO Box) (City) (St) (Zip)

**Children's Names and Birth Dates:**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Print or Type preparer's name: \_\_\_\_\_

Docket Number \_\_\_\_\_

Style of Case \_\_\_\_\_

OCSE Case Number \_\_\_\_\_

5

THE CIRCUIT COURT OF \_\_\_\_\_ COUNTY, ARKANSAS

\_\_\_\_\_ DIVISION [Civil, Probate, etc.]

\_\_\_\_\_  
Plaintiff

v.

No. \_\_\_\_\_

\_\_\_\_\_  
Defendant

SUMMONS

***THE STATE OF ARKANSAS TO DEFENDANT:***

\_\_\_\_\_ [Defendant's name and address.]

\_\_\_\_\_  
A lawsuit has been filed against you. The relief demanded is stated in the attached complaint. Within 30 days after service of this summons on you (not counting the day you received it) — or 60 days if you are incarcerated in any jail, penitentiary, or other correctional facility in Arkansas — you must file with the clerk of this court a written answer to the complaint or a motion under Rule 12 of the Arkansas Rules of Civil Procedure.

The answer or motion must also be served on the plaintiff or plaintiff's attorney, whose name and address are: \_\_\_\_\_

If you fail to respond within the applicable time period, judgment by default may be entered against you for the relief demanded in the complaint.

***Additional Notices Included:*** \_\_\_\_\_

CLERK OF COURT

Address of Clerk's Office

\_\_\_\_\_

\_\_\_\_\_

[SEAL]

\_\_\_\_\_  
[Signature of Clerk or Deputy Clerk]

Date: \_\_\_\_\_

***To be completed if service is by a sheriff or deputy sheriff:***

Date: \_\_\_\_\_ SHERIFF OF \_\_\_\_\_ COUNTY, ARKANSAS

By: \_\_\_\_\_  
[signature of server]

\_\_\_\_\_  
[printed name, title, and badge number]

***To be completed if service is by a person other than a sheriff or deputy sheriff:***

Date: \_\_\_\_\_

By: \_\_\_\_\_  
[signature of server]

\_\_\_\_\_  
[printed name]

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

Phone: \_\_\_\_\_

Subscribed and sworn to before me this date: \_\_\_\_\_

Notary Public \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

Additional information regarding service or attempted service:

\_\_\_\_\_  
\_\_\_\_\_





IN THE CIRCUIT COURT OF CRAIGHEAD COUNTY, ARKANSAS  
DOMESTIC RELATION DIVISION, \_\_\_\_\_ DISTRICT

"Petition for Order of Protection"  
(A.C.A. 9-15-203)

Case No. \_\_\_\_\_

\_\_\_\_\_  
Petitioner

Petitioner's home address:

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

\_\_\_\_\_  
Petitioner's work address:

Vs.

\_\_\_\_\_  
Respondent's home address:

\_\_\_\_\_  
Respondent

\_\_\_\_\_  
Respondent's work address:

\_\_\_\_\_  
Date of Birth, if known

\_\_\_ I am the petitioner and \_\_\_ at least 18 years of age \_\_\_ under 18 but emancipated.

\_\_\_ I am filing on behalf of myself.

\_\_\_ I am filing on behalf of a family or household member who is:

\_\_\_ a minor(s): (list) \_\_\_\_\_



an adjudicated incompetent person: (list) \_\_\_\_\_

The respondent is  at least 18 years of age  under 18 but emancipated.

I am an employee or volunteer of a domestic violence shelter or program, and I am filing on behalf of a minor.

The respondent and petitioner (or victim if filing on behalf of a minor or incompetent person): (check all that apply)

Are spouses;

Are related by blood;

Are parent and child;

Currently reside together or cohabit;

Are former spouses;

Formerly resided together or cohabit;

Have or have had a child in common;

Are presently or in the past have been in a dating relationship.

or

If order of protection of children is requested:

Children	Date of Birth	Address	Relationship to Parties
----------	---------------	---------	-------------------------


The respondent has committed domestic abuse to the petitioner or victim by the following acts: (describe)




I am afraid of the respondent and: (describe)

Lined area for describing the fear of the respondent.

\_\_\_ (1) There is an immediate and present danger of domestic abuse to me; or

\_\_\_ (2) The respondent is scheduled to be release from incarceration with thirty (30) days and upon the respondent's release there will be an immediate and present danger of domestic abuse to me.

The reasons are as follows: (describe)

Lined area for describing the reasons for the fear.

\_\_\_ Petitioner requests that the court issue an ex parte order of protection with the following provisions: (check all that apply)

\_\_\_ Excluding the respondent from a shared residence or from the residence of the petitioner or victim. Address of residence:

\_\_\_ Excluding the respondent from the place of business, employment, school, or other location of the petitioner or victim. Address of residence:

Final horizontal line at the bottom of the text area.



Excluding the respondent from the place of business, employment, school, or other location of the petitioner or victim. Address of:

Place of business: \_\_\_\_\_

Employment: \_\_\_\_\_

School: \_\_\_\_\_

Other (identify): \_\_\_\_\_

Prohibiting the respondent, directly or through an agent, from contacting the petitioner or victim, except under the following conditions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Awarding temporary custody of minor children as follows:

Child's Name and Name of Person to Receive Custody

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requiring the respondent to pay child support in the amount of \$\_\_\_\_\_ per child per month

Requiring the respondent to pay spousal support in the amount of \$\_\_\_\_\_ per month

Excluding the petitioner's address from notice to the respondent

It is further requested that upon hearing, the court issue a full order of protection with the following provisions: (check all that apply)

Excluding the respondent from the shared residence or from the residence of the petitioner or victim. Address of the residence: \_\_\_\_\_

Excluding the respondent from the place of business, employment, school, or other location of the petitioner or victim. Address of:

Place of business: \_\_\_\_\_

Employment: \_\_\_\_\_

School: \_\_\_\_\_

Other (identify): \_\_\_\_\_



Awarding temporary custody of minor children as follows:

Child's Name and Name of Person to Receive Custody

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requiring the respondent to pay child support in the amount of \$\_\_\_\_\_ per child per month.

Requiring the respondent to pay spousal support in the amount of \$\_\_\_\_\_ per month

Requiring the respondent to pay filing fees, service fees, court costs and petitioner's attorney fees.

I am involved in pending litigation with the respondent in the case of:

Case No.: \_\_\_\_\_

Circuit or District Judge: \_\_\_\_\_

County or City: \_\_\_\_\_

I have previously filed a petition for an order of protection against the respondent in the following case or cases:

Case No.: \_\_\_\_\_

Circuit Judge: \_\_\_\_\_

County: \_\_\_\_\_

The petitioner under oath states that the facts stated in the above petition are true according to the petitioner's best knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Petitioner's signature

STATE OF ARKANSAS

COUNTY OF \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:

\_\_\_\_\_.

✓

# PETITIONER INFORMATION PROTECTION ORDERS

PLEASE PRINT

FULL NAME OF PROTECTED PERSON \_\_\_\_\_

SEX \_\_\_\_\_ RACE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

#1 MINOR CHILD

NAME \_\_\_\_\_

SEX \_\_\_\_\_ RACE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

#2 MINOR CHILD

NAME \_\_\_\_\_

SEX \_\_\_\_\_ RACE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

#3 MINOR CHILD

NAME \_\_\_\_\_

SEX \_\_\_\_\_ RACE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

#4 MINOR CHILD

NAME \_\_\_\_\_

SEX \_\_\_\_\_ RACE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

#5 MINOR CHILD

NAME \_\_\_\_\_

SEX \_\_\_\_\_ RACE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

SIGNATURE OF PETITIONER

\_\_\_\_\_



IN THE CIRCUIT COURT OF \_\_\_\_\_ COUNTY, ARKANSAS  
\_\_\_\_\_ DIVISION

\_\_\_\_\_  
VS. CASE NO. \_\_\_\_\_

\_\_\_\_\_  
RESPONDENT

**AFFIDAVIT ACCOMPANYING PETITION FOR DOMESTIC ORDER OF PROTECTION**

I, \_\_\_\_\_, Petitioner in the above named Order of Protection Case having been duly sworn, depose and state the following under penalty of perjury:

1. I am the Petitioner in the above-captioned case for a Petition for an Order of Protection against the named Respondent.
2. In good faith, I believe I am entitled to an Order of Protection against the Respondent, and I submit this Affidavit in accordance with Arkansas Code Annotated § 9-15-201(e) (2).
3. The specific facts and circumstances that have led to the filing of this Order of Protection are as follows (additional attached pages, if any, are incorporated by reference as if laid out herein word for word):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





Lined writing area consisting of 25 horizontal lines.

✓

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 4. These facts, along with the facts alleged in my accompanying Petition constitute my request for an Ex-Parte Order of Protection and Final Order of Protection.
- 5. I am requesting that an Ex-Parte Temporary Order of Protection and a Final Order of Protection be entered granting me the relief set out in my accompanying Petition.

\_\_\_\_\_  
PETITIONER

\_\_\_\_\_  
DATE

STATE OF ARKANSAS    )  
COUNTY OF \_\_\_\_\_ )

SUBSCRIBED AND SWORN to before me, the below named officer, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

MY COMMISSION EXPIRES:

(SEAL)



## RESPONDENT INFORMATION PROTECTION ORDERS

PLEASE PRINT

FULL NAME OF RESPONDENT \_\_\_\_\_

SEX \_\_\_\_\_ RACE \_\_\_\_\_ SKIN TONE \_\_\_\_\_

HAIR COLOR \_\_\_\_\_ EYE COLOR \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

SCARS, MARKS AND TATOOS

---

---

---

---

MEDICAL CONDITIONS

---

---

---

VEHICLE DESCRIPTION (VIN) \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ STYLE \_\_\_\_\_ COLOR \_\_\_\_\_

LAST KNOWN ADDRESS

---

PLACE OF EMPLOYMENT \_\_\_\_\_

ADDITIONAL INFORMATION HELPFUL IN LOCATING SUBJECT

---

---

---

IN THE CIRCUIT COURT OF \_\_\_\_\_ COUNTY, ARKANSAS  
DOMESTIC RELATIONS DIVISION

\_\_\_\_\_, PETITIONER

v.

No. DR 20 \_\_\_\_ - \_\_\_\_

\_\_\_\_\_, RESPONDENT

Respondent's Address:

\_\_\_\_\_  
\_\_\_\_\_

NOTICE OF HEARING ON PETITION FOR ORDER OF PROTECTION

You are hereby notified that a petition has been filed in this Court for an Order of

Protection by \_\_\_\_\_, Petitioner, naming you as

Respondent. This petition will be heard on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_ at

\_\_\_\_\_ a.m./p.m., in Room \_\_\_\_\_, at the \_\_\_\_\_ County

Courthouse located at \_\_\_\_\_,

\_\_\_\_\_, AR.

If you fail to appear, the Court may enter a Final Order of Protection without further  
Notice to you.

\_\_\_\_\_  
CIRCUIT JUDGE

\_\_\_\_\_  
DATE

IN THE CIRCUIT COURT OF CRAIGHEAD COUNTY, ARKANSAS

DOMESTIC RELATIONS DIVISION

\_\_\_\_\_

VS.

DR-\_\_\_\_\_

\_\_\_\_\_

**ORDER OF DENIAL**

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, comes on for the Domestic Abuse Act of Arkansas:

\_\_\_\_\_ This matter is not subject to the Domestic Abuse Act of Arkansas

\_\_\_\_\_ That the petitioner has not sustained the burden of proof for issuance of an Order of Protection.

REASON:

IT IS, THEREFORE, CONSIDERED ORDERED AND ADJUDGED that the petition shall be dismissed.

\_\_\_\_\_

CIRCUIT JUDGE



# Ex Parte Order of Protection

Amended Order

Case No.

Circuit Court, Div.

County: , Arkansas

## Petitioner/Plaintiff

First Middle Last

Petitioner's Date of Birth (mm/dd/yyyy)

Race

Sex

## Minor Children Protected under this Order

<input type="text"/>	d.o.b.
<input type="text"/>	d.o.b.
<input type="text"/>	d.o.b.
<input type="text"/>	d.o.b.

## This Order is Effective Until:

Pursuant to Federal law, this Order shall be enforced by law enforcement officers in all states, territories, districts and tribal lands regardless of whether this Order of Protection is registered locally.

## Versus

## Respondent/Defendant

First Middle Last

Address:

Work:

## Respondent Identifiers

Sex	Race	DOB mm/dd/yyyy	Ht.	Wt.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Eyes	Hair	SS#
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone #		DL # or other ID #
<input type="text"/>		<input type="text"/>

### CAUTION:

- Respondent possesses a firearm
- Respondent has history of extreme violence

Relationship Identifiers:  Current or former spouses  Parents of child(ren) in common  
 Live together  Current or past dating relationship  Other Relative (Explain) \_\_\_\_\_

STOP\*

STOP\*

**THE COURT HEREBY FINDS AND ORDERS:**

- That there is jurisdiction over the parties and subject matter, and Petitioner has presented sufficient evidence to show:  
(1) that the victim(s) is (are) in immediate and present danger of domestic abuse, or  
(2) that the Respondent is scheduled to be released from incarceration within thirty (30) days, and upon the Respondent's release there will be an immediate and present danger of domestic abuse.
- That the Petitioner has also presented sufficient evidence to show that the Respondent presents a credible threat to the physical safety of a person named in the order of protection as a family member or household member, a child of the family or household member, or a child of the respondent or enjoined party.
- That an Ex Parte Temporary Order of Protection is hereby granted pursuant to the terms herein.

That the Respondent is ordered to appear before the Court on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,

at \_\_\_\_\_ .m. in the Courthouse located at \_\_\_\_\_ AR. **If you fail to appear, the Court will likely make this Order permanent without further notice to you. The Respondent is hereby restrained from committing any criminal act against the victim(s) including, but not limited to: acts of violence or Domestic Abuse, A.C.A. §9-15-103(3); Harassment A.C.A. §5-71-208; Harassing Communications A.C.A. §5-71-209; Stalking A.C.A. §5-71-229; or Terroristic Threatening A.C.A. §5-13-301.**

The Respondent is prohibited from initiating any contact with the victim(s) including but not limited to physical presence, telephonic, electronic, oral, written, visual, or video. Respondent also shall not use a third party to contact the victim(s) except by legal counsel or as authorized by law or court order.

The Respondent is excluded from the Petitioner's residence and the immediate vicinity thereof.

**Petitioner's Address:** \_\_\_\_\_ (or)

The Petitioner's address is excluded from notice to the Respondent.

The Respondent is prohibited from the following places:

**Petitioner's Workplace:** \_\_\_\_\_

**School:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Other (Identify):** \_\_\_\_\_

(Children's Names) \_\_\_\_\_

\_\_\_\_\_ is awarded temporary custody of minor child(ren):

(Children's Names) \_\_\_\_\_

- Any law enforcement officer with jurisdiction is ordered to assist the Petitioner in gaining possession of the dwelling and/or to otherwise assist in execution of the Order of Protection.
- A law enforcement officer with jurisdiction is ordered to serve the Order of Protection on the Respondent.
- A law enforcement officer with jurisdiction is ordered to assist the Petitioner in obtaining his or her personal effects from the dwelling upon proper and timely request of the Petitioner.
- A law enforcement officer with jurisdiction is ordered to assist the Respondent in obtaining his or her personal effects from the dwelling upon proper and timely request of the Respondent.

Other Orders: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Respondent is temporarily prohibited from terminating the account(s) associated with the following telephone number(s):  
\_\_\_\_\_  
\_\_\_\_\_

If the parties (or other persons named herein) are subject to the jurisdiction of another court (i.e. through a divorce or paternity action), upon proper notice and the opportunity to be heard, said court may amend the terms of this Order as appropriate.

On this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_, IT IS ORDERED.



Office of the Circuit Clerk, \_\_\_\_\_ County, Arkansas

**WARNINGS TO RESPONDENT**

- (1) A violation of the order of protection is a Class A misdemeanor carrying a maximum penalty of one (1) year's imprisonment in the county jail or a fine of up to one thousand dollars (\$1,000), or both;
- (2) A violation of an order of protection under this section within five years of a previous conviction for a violation of an order of protection is a Class D felony;
- (3) It is unlawful for an intimate partner who is subject to an order of protection or an individual convicted of a misdemeanor of domestic violence to ship, transport, or possess a firearm or ammunition under 18 U.S.C. §922(g)(8) and (9) as it existed on January 1, 2019;
- (4) A conviction of violation of an order of protection under this section within five (5) years of a previous conviction for violation of an order of protection is a Class D felony;
- (5) A person who is a respondent or an enjoined party is restrained from harassing, stalking, or threatening a person named in an order of protection as a family or household member, a child, of the family or household member, or a child of the respondent or enjoined party;
- (6) A person who is a respondent or an enjoined party is restrained from engaging in other conduct that would place a person named in an order of protection as a family or household member, a child of the family or household member, or a child of the respondent or enjoined party in reasonable fear of bodily injury; and
- (7) A person who is a respondent is prohibited from using, attempting to use, or threatening the use of physical force against the person named in the order of protection as a family or household member, a child of the family or household member, or a child of the respondent or enjoined party which would reasonably be expected to cause bodily injury.

-Crossing state, territorial, or tribal boundaries to violate this Order may result in federal imprisonment pursuant to 18 U.S.C. §2262.

**NOTICE TO LAW ENFORCEMENT**

-This Order of Protection is enforceable in every county of this state by any court or law enforcement officer. See A.C.A. §9-15-207(g).

**PROOF OF SERVICE**

Case #: \_\_\_\_\_ Court Date: \_\_\_\_\_

SERVED: Date \_\_\_\_\_ Time \_\_\_\_\_ Place \_\_\_\_\_

Attempts Made: List only date and time

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

\_\_\_\_\_  
Served On (Print Name) \_\_\_\_\_ Manner of Service

\_\_\_\_\_  
Served By (Print Name) \_\_\_\_\_ Title \_\_\_\_\_ Badge #

**DECLARATION OF SERVER**

I declare, under penalty of perjury under the laws of the State of Arkansas, that the foregoing information contained in the proof of service is true and correct.

Executed on \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Server

\_\_\_\_\_  
Address of Server