		Petitioner,	Case No
Addition	al Petitioner/Minor	, r Child(ren),	PETITION AND AFFIDAVIT TO OBTAIN DOMESTIC ABUSE PROTECTION ORDER
Additiona vs.	al Petitioner/Minor	Child(ren);	
]	, Respondent.	
abuse prot		ant to <mark>Neb. R</mark>	, am petitioning for a domestic ev. Stat.§ 42-924. I am filing this
Myself a whose na My relati	ame(s) is/are shown	oner(s) who a after mine in ional petition	re victims of domestic abuse and n the caption of this petition. er(s)/minor child(ren) is/are: ner:
Only on I	behalf of the addition	onal petitione	r(s) who are in fear of domestic fter mine in the caption of this
			er(s)/minor child(ren) is/are:
AND:			
I am 19 o	or older or legally e	emancipated	OR
I am a mi	inor and	years of	age.

I do not speak English. The language that I speak is: _____.

2. Check Only One:

I have received address protection from the Secretary of State under the Address Confidentiality Program.(Service of any court process shall be made by mailing two copies of the process to the Office of Secretary of State, Address Confidentiality Program, Suite 2300, State Capitol Building, Lincoln, NE, 68509)

I am living at a safe house or shelter for my own protection. Pursuant to Neb. Rev. Stat. § 29-4303, I cannot identify the name, address, location or phone number of the facility.

My address is

(Street or Route/Box)	(City)	(State) (ZIP code)
Mailing address (if different)		
(Street or Route/Box)	(City)	(State) (ZIP code)

3. Neb. Ct. Rule § 2-208 requires people involved in a case who are not attorneys to provide their email address or provide a reason why they cannot receive emails.

I do not have the ability to receive emails. The reason I cannot receive email is:

My email address is: _

NOTE: By providing this email address, I acknowledge that I am aware that this information will be public record. I also understand that I will only receive email communications regarding this case from the court.

- 4. My relationship to the respondent is: (Check the **ONE** that best applies):
 - spouse (husband or wife) former spouse child someone I am living with someone I have lived with in the past the father/ mother of one or more of my children Not applicable because requesting only on behalf of other(s)

someone I am presently dating someone I have dated in the past someone related to me in the following way: 5. I am filing this petition against the respondent whose age is: _____, and who resides at:

(Street or Route/Box)		(City)	(State)	(ZIP code)
Mailing address (if	different)			
(Street or Route/Box)		(City)	(State)	(ZIP code)
(Phone number)				
The respondent does speaks is: The following are id				pondent
Sex:		1		
Height:				
Hair Color:	-	•		
Driver's License #:				
Exp. Date:				
Place of Birth:				
Scars/Marks/Tattoos				

Other distinguishing features:

6.

7. The respondent and I have **or** have not been involved in past or current court cases together. (i.e., divorce, paternity, custody, juvenile, criminal, or protection orders) If so: when, where, type of case, name of court(s), and case number(s).

8. The respondent and I are parents of the following minor child(ren).

Name:	Age:
Residence:	
Name:	Age:
Residence:	
Name:	Age:
Residence:	
Name:	Age:
Residence:	
Name:	Age:
Residence:	

I am the parent, but the respondent is not the parent, of the following minor child(ren):

Name:	Age:
Residence:	
Name:	Age:
Residence:	
Name:	Age:
Residence:	

9. I hereby ask the court to enter a protection order (mark all that apply):

prohibiting the respondent from imposing any restraint upon me or upon my liberty;

prohibiting the respondent from threatening, assaulting, molesting, or attacking me, or otherwise disturbing my peace;

prohibiting the respondent from telephoning, contacting, or otherwise communicating with me;

removing and excluding the respondent from my residence;_

ordering the respondent to stay away from the following location(s): (specify address, location description, and connection of place to petitioner)

(Continued on next page.)

(Continued from previous page.)

granting me temporary custody of the following minor children for _____ days (not to exceed 90 days):

Name:	Age:
Residence:	
Name:	Age:
Residence:	
Name:	Age:
Residence:	
Name:	Age:
Residence:	
Name:	Age:
Residence:	

prohibiting the respondent from possessing or purchasing a firearm as defined in Neb. Rev. Stat. § 28-1201.

granting me sole possession of any household pet(s) owned, possessed, leased, kept, or held by the petitioner, the respondent, or any family or household member residing in the household of the petitioner or respondent. The pet(s) I am requesting sole possession of are:

Name Species Description	Name	Species	Description
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Such sole possession shall last for the duration of the protection order or until further order of the court. Sole possession does not determine ownership. The petitioner shall not permanently transfer, sell, or dispose of a household pet(s) placed in the petitioner's possession without prior court approval. Court approval shall not be required in cases where humane euthanasia of a seriously ill or injured household pet(s) is recommended by a licensed veterinarian.

enjoining the respondent from coming into contact with, harming, or killing any household pet(s) owned, possessed, leased, kept, or held by the petitioner, the respondent, or any family or household member of the petitioner or respondent. ordering any other relief deemed necessary to provide for the safety and welfare of me and any designated family or household member, (describe relief requested and why):

- 10. I request to have a **District Court Judge**, or a **County Court Judge** preside over this proceeding.(I understand this request may not be granted.).
- 11. For purposes of the Protection from Domestic Abuse Act, abuse means the occurrence of one or more of the following acts:

(a) attempting to cause or intentionally and knowingly causing bodily injury;(b) placing, by means of credible threat, another person in fear of bodily injury (either verbally or in writing), or;

(c) engaging in sexual contact or sexual penetration without consent.

The dates or approximate dates and facts of the most recent **and** the most severe incident or incident(s) of domestic abuse are as follows: (Please write a brief but detailed description of each incident. Examples might include shoves, kicks or blows inflicted, weapons used, threats made, injuries sustained, medical or hospital treatment necessary).

A. Date/Time: ______Description:

B. Date/Time:Description

C. Date/Time: ______Description:

12. I request the court treat this Petition and Affidavit for a Domestic Abuse Protection Order as a request for a sexual assault protection order or a harassment protection order if it appears to the court, based on facts contained in this Petition and Affidavit and the evidence presented at a show cause hearing, that another type of protection order is more appropriate in this case, and the court makes such findings.

13. Additional Petitioner(s) (if needed):

	oner 2 (Minor Child):		
Name			Age:
Relation	onship to the Respondent (F	rom list on number 4):	
Reside	ence:		
	The address of this Petition	er is the same as my ad	dress above.
	This Petitioner's address is	:	
	(Street or Route/Box)	(City)	(State) (ZIP code)
Petitio	oner 3 (Minor Child):		
Name:			Age:
Relation	onship to the Respondent (F	rom list on number 4):	
Reside	ence:		
	The address of this Petition	er is the same as my ad	dress above.
	This Petitioner's address is	:	
	(Street or Route/Box)	(City)	(State) (ZIP code)
Petitic	oner 4 (Minor Child):		
I CHIN			
Name:	· · · · · · · · · · · · · · · · · · ·		Age:
Name	· · · · · · · · · · · · · · · · · · ·	rom list on number 4):	Age:
Name: Relatio	onship to the Respondent (F	rom list on number 4):	Age:
Name	onship to the Respondent (F		0
Name: Relatio	onship to the Respondent (F	er is the same as my ad	0

			A ~~~
Relation	nship to the Respondent (Fr		Age:
	- · · ·	·	
Residen		• .1 11	1
	The address of this Petition	•	ress above.
	This Petitioner's address is:	:	
	(Street or Route/Box)	(City)	(State) (ZIP code)
Petition	er 6 (Minor Child):		
Name:			Age:
Relation	nship to the Respondent (Fi	rom list on number 4):	
Residen	ce:		
r	The address of this Petition	er is the same as my add	ress above.
r	This Petitioner's address is:	:	
-	(Street or Route/Box)	(City)	(State) (ZIP code)
I hereby	y swear, or affirm, under pe	enalty of perjury, the forg	going affidavit is true.
Signature	e of Petitioner		going affidavit is true.
Signature	-		going affidavit is true.
Signature (Name, Fi (do NO' NOTAF	e of Petitioner	completed by an attorney) RK OF THE DISTRIC /ITNESSES YOU SIG	T COURT OR A NING)
Signature (Name, Fi (do NO' NOTAF	e of Petitioner rm name, and Bar Number IF being T sign UNTIL THE CLEI RY IS PRESENT AND W	completed by an attorney) RK OF THE DISTRIC /ITNESSES YOU SIG	T COURT OR A NING)
Signature (Name, Fi (do NO' NOTAF	e of Petitioner rm name, and Bar Number IF being T sign UNTIL THE CLEI RY IS PRESENT AND W bed and sworn before me of Clerk of theCourt/Nota	completed by an attorney) RK OF THE DISTRIC /ITNESSES YOU SIG	T COURT OR A NING) ,(Seal
Signature (Name, Fi (do NO' NOTAF	e of Petitioner rm name, and Bar Number IF being T sign UNTIL THE CLEI RY IS PRESENT AND W bed and sworn before me of Clerk of theCourt/Nota	completed by an attorney) RK OF THE DISTRIC /ITNESSES YOU SIG n ary Public	T COURT OR A NING) ,(Seal