



**•CONFIDENTIAL• PROTECTIVE ORDER INFORMATION SHEET•FOR SHERIFF'S USE ONLY**

<b>Respondent's Name</b>				
<b>Alias Names (including maiden name)</b>				
<b>Sex</b>	<b>Age</b>	<b>Date of Birth</b>	<b>Race</b>	<b>Skin Tone</b>
<b>Height</b>	<b>Weight</b>	<b>Hair</b>	<b>Eyes</b>	<b>Glasses</b>
<b>Tattoos, Scars, Birthmarks, Mustache, Beard?</b>				
<b>Known Address for Service</b>		<b>Unit #</b>	<b>City/Town</b>	
<b>Last Known Address</b>		<b>Unit #</b>	<b>City/Town</b>	
<b>Work Address</b>		<b>Unit #</b>	<b>City/Town</b>	
<b>Name of Business</b>		<b>Occupation / Type of work</b>		
<b>Alternate Address(es) for Service</b>		<b>Unit #</b>	<b>City/Town</b>	
<b>RESPONDENT'S PHONE NUMBER:</b>				
<b>Service Information*</b>				
<b>* For Service Information please provide as much information as possible, i.e.: best hours to serve, C/O information, unit or apartment number, type of building, business name, type of work performed...</b>				
<b>Vehicle Make</b>	<b>Vehicle Model</b>	<b>Year</b>		
<b>Color</b>	<b>License Plate</b>	<b>License State</b>		
<b>Notes/Additional Information</b>				
<b>Petitioner's Name:</b>				
<b>Phone Number:</b>	<b>Cell Phone Number:</b>	<b>Alternate Number:</b>		

<b>Additional Alias Information</b>
<b>Case Number</b>
<b>Sheriff's Number</b>

**Caution Information**  
**Check all that apply:**

History of **Mental Illness**

**Suicidal Tendencies**

Likely to be under the Influence of **Alcohol**

Likely to be under the Influence of **Drugs**

Likely to Carry a **Weapon**

**Weapon(s)** in the home

If yes to either question please specify type and location of weapon(s)

Is the Subject on **Court Ordered Probation?**

If yes, what County? \_\_\_\_\_

**•FOR SHERIFF'S USE ONLY•**

Parole

Sex Offender

Valid FOID

**Type of Service**

Service Only

Put-Out / Stay Away

R02,  R03,  R14

Return Minor Child(ren)

Seizure Warrant (R14.5)

Warrant for Firearm

Affidavit in Support of Warrant & Order

Active Warrant

CCDOC

IDOC/Parole