



Keep in mind that the order you have received is in effect and remains in effect until the court that issued the order modifies or dismisses it or until it expires. If you are arrested for violating this order, the security amount (bail) is \$5,000, unless a different amount is ordered by the court.

This order, or any order continuing or changing this order, is enforceable in every county in Oregon. It is also enforceable in all 50 states, the District of Columbia, tribal lands, and territories of the United States.

Violation of this order, or any order changing this order, constitutes contempt of court, punishable by a fine of up to \$500 or one percent of your annual gross income, whichever is greater, or a jail term of up to six months, or both. Other sanctions may also be imposed for contempt.

**NOTICE:**

**FIREARMS PROHIBITIONS MAY APPLY TO YOU**

As a result of this Order, or any Order continuing or changing this Order, it may be unlawful for you to possess or purchase a firearm, including, a rifle, pistol, or revolver, or ammunition pursuant to federal law under 18 U.S.C. § 922(g)(8), as well as state and local law. If you have any questions whether these laws make it illegal for you to possess or purchase a firearm, you should consult an attorney.

While this Order, or any Order changing this Order, is in effect, federal law may prohibit you:

- Traveling across state lines or tribal land lines with the intent to violate this Order and then violating this Order.
- Causing the petitioner to cross state lines or tribal land lines for your purpose of violating the Order.
- Possessing, receiving, shipping, or transporting any firearm or firearm ammunition.

Whether or not a Restraining Order is in effect, federal law may prohibit you from:

- Traveling across state lines or tribal land lines with the intent to injure the Petitioner and then intentionally committing a crime of violence causing bodily injury to the Petitioner.
- Causing the Petitioner to travel across state lines or tribal land lines if your intent is to cause bodily injury to the Petitioner or if the travel results in you causing bodily injury to the Petitioner.

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**REQUEST FOR HEARING**  
*(To Be Completed By Respondent Only)*

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
COUNTY OF \_\_\_\_\_

	)	
	)	<b>REQUEST FOR HEARING RE:</b>
	)	<b>ORDER RENEWING RESTRAINING ORDER</b>
	)	<b>(FORMER PROTECTED CHILD)</b>
_____	)	<u>See CIF</u>
Petitioner (Former Protected Child)	)	(date of birth)
(full name)	)	
and	)	Case No. _____
	)	
	)	
	)	
	)	
_____	)	<u>See CIF</u>
Respondent	)	(date of birth)
(full name of person to be restrained)	)	
	)	Original Petitioner
	)	(date of birth)
	)	(full name of person who obtained original
	)	restraining order but is not a party to this renewal
	)	request)

See CIF

\_\_\_\_\_

(full name of person who obtained original  
restraining order but is not a party to this renewal  
request)

I am the Respondent in the above-referenced action, and I request a hearing to contest all or part of the Order Renewing Restraining Order Re: Former Protected Child as follows (mark one or more):

- The reason for the renewal.
- Other term(s) of the Order (please be specific): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I  will  will not be represented by an attorney at the hearing. The name and bar number of the attorney (if known) are: \_\_\_\_\_

- I will need \_\_\_\_\_ language interpretation services at the hearing.
- I will need the following Americans with Disabilities Act accommodations at the hearing: *(List)*  
\_\_\_\_\_

Notice of the time and place of the hearing can be mailed to me at the address below.

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Respondent's Signature

**Certificate of Document Preparation** You are required to truthfully complete this certificate regarding the document you are filing with the court. Check all boxes and complete all blanks that apply:

- I selected this document for myself and I completed it without paid assistance.
- I paid or will pay money to \_\_\_\_\_ for assistance in preparing this form.

**Submitted by:**

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Print Name,  Respondent  Attorney for Respondent  OSB No. (*if applicable*)

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Address or Contact Address  
Use Safe Contact Address

City, State, Zip

Telephone or Contact Telephone Number  
Use Safe Contact Number