IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF _____

_____	)	Case No. _____
☐ Petitioner	)	
☐ Petitioner-Parent/Guardian of Minor Child	)	
☐ _____	)	
(Name of Protected Minor Child)	)	
(full names)	)	
v.	)	**NOTICE TO RESPONDENT/**
	)	**REQUEST FOR HEARING**
	)	(Sexual Abuse Protective Order)
_____	)	
Respondent	)	
(full name of person to be restrained)	)	

THIS FORM MUST BE ATTACHED TO SERVICE COPY
OF ORDER RENEWING PROTECTIVE ORDER.

To Respondent: The Sexual Abuse Protective Order previously issued by the court has been renewed (continued) and remains in effect. The court has found that a person in the Petitioner's situation would reasonably fear for his/her physical safety if the Order is not renewed. This renewed Order becomes effective immediately.

If you wish to contest the renewal of this Order, you must complete page 3 and mail or deliver it to

_____
(Name and Address of Court)

Requests for hearing must be made within 30 days after you receive the Order. You must include your address and telephone number with your request for a hearing. The hearing will be held within 21 days. At the hearing, a judge will decide whether the Order should be renewed. The only issue that will be considered at the hearing is the reason for the renewal unless the Petitioner agrees with your written request to hear other issues involving the Sexual Abuse Protective Order.

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 terminates 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.

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 USC § 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 or Protective 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.

REQUEST FOR HEARING
(To Be Completed By Respondent Only)

IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF _____

_____	)	Case No. _____
☐ Petitioner	)	
☐ Petitioner-Parent/Guardian of Minor Child	)	
☐ _____	)	
(Name of Protected Minor Child)	)	
(full names)	)	
v.	)	**REQUEST FOR HEARING**
	)	**RE: ORDER RENEWING SEXUAL ABUSE**
_____	)	**PROTECTIVE ORDER**
Respondent	)	
(full name of person to be restrained)	)	

I am the Respondent in the above-referenced action and I request a hearing to contest all or part of the Order Renewing Sexual Abuse Protective Order as follows (mark one or more):

☐ The basis 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 Americans with Disabilities Act accommodations at the hearing.

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

_____ _____
Respondent's Signature Date

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:

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

_____
Address or Contact Address City, State, Zip Telephone or Contact Telephone Number
Use Safe Contact Address Use Safe Contact Number