

**FOND DU LAC COUNTY SHERIFF'S OFFICE
DOMESTIC ABUSE/HARASSMENT INFORMATION SHEET**

Petitioner: _____ DOB: _____

Address: _____

Home Phone#: _____ work#: _____

INSTRUCTIONS TO PETITIONER: The Fond du Lac County Sheriff's Office will deliver your Petition and other papers to the respondent as soon as possible, therefore, it is important to have accurate and reliable information to help locate the respondent. By filling out this form as completely as possible, you can help avoid unnecessary delays.

RESPONDENT'S INFORMATION:

Name: _____ Home Phone: _____

Currently living at: _____ DOB: _____

Employer Name: _____ Occupation: _____ Phone# _____

Employer Address: _____ Work hours? _____

Does respondent work at a location other than employer's address? _____

Where? _____ Work hours? _____

Height _____ Weight _____ Race _____ Sex _____ Eye Color _____ Glasses _____

Hair Color _____ Beard _____ Mustache _____ Other: (tattoos, etc.) _____

Does respondent carry or possess any weapons? If so, what kind of weapons are they and where are they carried/stored? _____

Is respondent a heavy drinker? _____ Drug user? _____
Describe any history of violence that respondent may have, other than what is already stated in the Petition? _____

Where else might we be able to locate the respondent? _____

Parents: Name, phone, address _____

Description of Respondent's vehicle: Year _____ Make & Model _____

Color _____ License# _____

Unusual characteristics (dents, stripes, etc.) _____

**PLEASE RETURN THIS SHEET ALONG WITH YOUR RESTRAINING ORDER TO THE
FOND DU LAC COUNTY SHERIFF'S OFFICE FOR SERVICE.**