

## FORM 10.03-G: INFORMATION ABOUT FILING A CIVIL STALKING PROTECTION ORDER AND A CIVIL SEXUALLY ORIENTED OFFENSE PROTECTION ORDER

If you have any questions about completing the Petition for a Civil Stalking Protection Order (CSPO) or a Civil Sexually Oriented Offense Protection Order (Form 10.03-D), contact the local victim assistance program, domestic violence program, or Ohio Domestic Violence Network at 800-934-9840.

Neither the Clerk of Court's Office nor the local domestic violence program can give legal advice. If you need legal advice, talk to a lawyer. Only a lawyer can give you legal advice.

There is NO FEE for filing the Petition.

Once completed, take the Petition and other necessary documents to the Clerk of Court's Office.

If you want an emergency order, also known as an Ex Parte Protection Order, check "want" in paragraph 2 of the Petition.

The Court will consider your request for an Ex Parte Protection Order and may ask you questions.

Regardless if an Ex Parte Protection Order was requested, granted, or denied, a full hearing will be scheduled.

You must attend the full hearing. Your victim advocate may also be present at the hearing.

On the day of the full hearing, be prepared to (1) tell the Court what happened, (2) bring with you any witnesses, evidence, and documentation to prove your case, and (3) ask Respondent questions.

Respondent may be represented by a lawyer. You may ask for a continuance to obtain a lawyer per R.C. 2903.214(D)(2)(iii).

Respondent or Respondent's lawyer may present evidence and ask you questions.

The Court cannot issue a protection order against you unless Respondent has filed a Petition.

### DEFINITIONS

**Menacing by Stalking**

[R.C. 2903.211(A)(1) through (3)]

No person by engaging in a pattern of conduct shall knowingly cause another person to believe that the offender will cause physical harm to the other person or cause mental distress to the other person.

No person, through the use of any form of written communication or any electronic method of remotely transferring information, including, but not limited to, any computer, computer network, computer program, or computer system, or telecommunication device, shall post a message or use any intentionally written or verbal graphic gesture with purpose to (a) violate [this law] **OR** (b) urge or incite another to commit a violation of [this law]. No person, with a sexual motivation, shall violate [this law].

**Pattern of Conduct**

[R.C. 2903.211(D)(1)]

Pattern of conduct means two or more actions or incidents closely related in time.

**Mental Distress**

[R.C. 2903.211(D)(2)]

Mental distress means: (a) any mental illness or condition that involves some temporary substantial incapacity **OR** (b) any mental illness or condition that would normally require psychiatric treatment, psychological treatment, or other mental health services, regardless if psychiatric treatment, psychological treatment, or other mental health services was requested or received.

**Sexually Oriented Offense**

[R.C. 2950.01.]

Sexually oriented offenses are defined at R.C. 2950.01.

## **INFORMATION CONCERNING LOCAL VICTIM ASSISTANCE PROGRAM**

Prior to filing a petition for a civil stalking protection order you may, but are not required to, contact Fairfield County's Local Victim Assistance Program:

Civil Protection Order Advocate  
The Lighthouse, Inc.  
136 W. Main St., 2<sup>nd</sup> Floor  
Lancaster, Ohio 43130  
740-687-6778, Ext. 302  
lhadvocate4@ci.lancaster.oh.us

The Lighthouse Civil Protection Order Advocate can help answer questions regarding protection orders and can help victims understand the judicial process and attend legal and court appointments with the victim as requested. The Victim Advocate, however, is not an attorney and cannot provide legal advice

You can also find information about filing a Civil Stalking Protection Order or Civil Sexually Oriented Offense Protection Order online at:

[www.ohiolegalhelp.org/topic/stalking-soo-cpo](http://www.ohiolegalhelp.org/topic/stalking-soo-cpo)

**IN THE COURT OF COMMON PLEAS  
FAIRFIELD COUNTY, OHIO**

Petitioner	:	Case No.
	:	
Address (Safe mailing address)	:	Judge/Magistrate
City, State, Zip Code	:	
Date of Birth:      /      /	:	
v.	:	<input type="checkbox"/> PETITION FOR CIVIL STALKING PROTECTION ORDER (R.C. 2903.214)
	:	
Respondent	:	<input type="checkbox"/> PETITION FOR CIVIL SEXUALLY ORIENTED OFFENSE PROTECTION ORDER (R.C. 2903.214)
	:	
Address (If home address unknown, may be work address)	:	
	:	
City, State, Zip Code	:	
	:	
Date of Birth:      /      /	:	<input type="checkbox"/> Respondent is 18 years old or older

**IF YOU ARE ASKING YOUR ADDRESS TO BE KEPT CONFIDENTIAL, PLEASE PUT A MAILING ADDRESS WHERE YOU CAN SAFELY RECEIVE MAIL. IF YOU ARE A PARTICIPANT IN THE SECRETARY OF STATE'S ADDRESS CONFIDENTIALITY PROGRAM, PLEASE USE THE P.O. BOX ADDRESS GIVEN TO YOU. THIS FORM IS A PUBLIC RECORD.**

- ☐ 1. I need or a witness needs a foreign language interpreter in \_\_\_\_\_ or an American Sign Language interpreter per Sup.R. 88.
2. I ☐ want ☐ do not want an ***ex parte* (emergency) protection order** per R.C. 2903.214(D).  
Petitioner further requests a full hearing trial be scheduled, even if the *ex-parte* protection order is granted, denied, or not requested.
- ☐ 3. Who needs protection?
- ☐ Me
- ☐ My minor children
- ☐ A family or household member who is not a minor child
- ☐ Other \_\_\_\_\_
4. I have listed below all family or household members who need protection, other than me or the person for whom I am filing the Petition. (Leave blank if you are **not** including other family or household members.)

NAME	DATE OF BIRTH	RELATIONSHIP TO PETITIONER	LIVES WITH PETITIONER
	/ /		<input type="checkbox"/> YES <input type="checkbox"/> NO
	/ /		<input type="checkbox"/> YES <input type="checkbox"/> NO
	/ /		<input type="checkbox"/> YES <input type="checkbox"/> NO
	/ /		<input type="checkbox"/> YES <input type="checkbox"/> NO
	/ /		<input type="checkbox"/> YES <input type="checkbox"/> NO

- ☐ 5. Petitioner requests a **Civil Stalking Protection Order**.

You **must** describe two or more incidents closely related in time that made you believe that Respondent will cause you physical harm or cause (or has caused) you mental distress. When did they happen (if you do not know exact dates, give approximate dates)?

**If you need more space, attach an additional page.**

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- ☐ 6. Petitioner requests a **Civil Sexually Oriented Offense Protection Order**.

You **must** describe what Respondent did to you or the persons named in this Petition as fully as possible. You do not need to prove a pattern of conduct. One act may be enough.

**If you need more space, attach an additional page.**

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7. Petitioner further requests the Court grant relief under R.C. 2903.214 for Petitioner and the family or persons named in this Petition by granting a Civil Stalking Protection Order or Civil Sexually Oriented Offense Protection Order that:

- ☐ (a) Directs Respondent to not abuse Petitioner and persons named in this Petition by harming, attempting to harm, threatening, following, stalking, harassing, contacting, forcing sexual relations upon them, or by committing sexually oriented offenses against them.
- ☐ (b) Directs Respondent to not enter the residence, school, business, place of employment, child care providers, or day care centers of Petitioner and persons named in this Petition, including the buildings, grounds, and parking lots at those locations.
- ☐ (c) Directs Respondent not to interfere with Petitioner's right to occupy the residence including, but not limited to canceling any utilities or insurance or interrupting phone service, mail delivery, or the delivery of any other documents or items.

- ☐ (d) Directs Respondent not to remove, damage, hide, or dispose of any property, companion animals, or pets owned or possessed by Petitioner and persons named in this Petition.
- ☐ (e) Grants Petitioner permission to take Petitioner's companion animals or pets, as described below, away from the possession of Respondent.
- ☐ (f) Directs Respondent not to possess, use, carry, or obtain any deadly weapon, firearms, and ammunition.
- ☐ (g) Directs Respondent to be electronically monitored, because Respondent's conduct, as explained below, puts the health, welfare, or safety of Petitioner and the persons named in this Petition at risk. Also, as explained below, Respondent continues to present a danger to Petitioner and the persons named in this Petition. **If you need more space, attach an additional page.**

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- ☐ (h) Includes the following additional provisions:

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8. Petitioner further requests that the Court not issue any mutual protection orders or other orders against Petitioner unless all of the conditions of R.C. 2903.214(E)(3) are met.
9. Petitioner further requests that if Petitioner has a victim advocate, the Court permit the victim advocate to accompany Petitioner at all stages of these proceedings as required by R.C. 2903.214(L).
10. Petitioner further requests that the Court grant such other relief designed to ensure the safety and protection of Petitioner and persons named in this Petition.
11. Petitioner has listed court cases (including divorce, custody, visitation, children service case; pending criminal case or conviction for felonious assault, aggravated assault, assault, aggravated menacing, menacing by stalking, menacing, aggravated trespass; animal cruelty; sexually oriented offenses; no contact order; stay away order, and other protection order) and other legal matters involving Respondent, that may relate to this case: **(If you need more space, attach an additional page.)**

CASE NAME	CASE NUMBER	COURT/COUNTY	RESULT OF CASE

**I swear or affirm that the answers above are true, complete, and accurate to the best of my knowledge. I understand that making false statements in this document may result in a contempt of court finding against me which could result in a jail sentence and fine, and may also subject me to criminal penalties for perjury under R.C. 2921.11.**

\_\_\_\_\_  
SIGNATURE OF PETITIONER

\_\_\_\_\_  
DATE

**IF YOU DO NOT HAVE A LAWYER, PLEASE LEAVE THE INFORMATION BELOW BLANK.**

\_\_\_\_\_  
Signature of Petitioner's Attorney

\_\_\_\_\_  
Attorney's Registration Number

\_\_\_\_\_  
Name of Attorney

\_\_\_\_\_  
Attorney's Telephone

\_\_\_\_\_  
Attorney's Address

\_\_\_\_\_  
Attorney's Fax

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Attorney's Email

Case No. \_\_\_\_\_

**THE COURT OF COMMON PLEAS  
FAIRFIELD COUNTY, OHIO**

\_\_\_\_\_  
**Petitioner** : Case No. \_\_\_\_\_  
**v.** : Judge/Magistrate \_\_\_\_\_  
\_\_\_\_\_  
**Respondent** :

**REQUEST FOR SERVICE**

TO THE CLERK OF COURT:

Pursuant to Civ.R. 65.1(C)(2), please serve Respondent a copy of the Petition, *ex parte* protection order, if granted, and any other accompanying documents to the address below and as follows:

☐ Personal service  
☐ Other (specify) \_\_\_\_\_

☐ Certified Mail, Return Receipt Requested

☐ Other (address): \_\_\_\_\_

☐ Personal Service  
☐ Other (specify) \_\_\_\_\_

☐ Certified Mail, Return Receipt Requested

SPECIAL INSTRUCTIONS TO SHERIFF:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE OF ATTORNEY OR PETITIONER**

**RETURN OF SERVICE**

Respondent was served on \_\_\_\_\_.

\_\_\_\_\_  
Officer and Badge Number

\_\_\_\_\_  
Law Enforcement Agency

\_\_\_\_\_  
Date

**CLERK'S CERTIFICATE OF MAILING**

Service of Process was sent by \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_.

Attest: \_\_\_\_\_ Deputy Clerk