

**IN THE DISTRICT COURT OF \_\_\_\_\_ COUNTY, NEBRASKA**

**PRAECIPE**

\_\_\_\_\_  
Petitioner

vs.

\_\_\_\_\_  
Respondent

**TO THE CLERK OF COURT:**

Please have the Sheriff of \_\_\_\_\_ County serve a certified copy of the protection order, petition, and request for hearing upon the respondent by personal service at any one of the following addresses:

Home: \_\_\_\_\_

Work: \_\_\_\_\_

Other locations where respondent can be found: \_\_\_\_\_

Directions for Service: \_\_\_\_\_

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

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

(If you are concealing your address or phone, do not provide them, make separate arrangements with the clerk.)

**Fill in any of the following information if known**

**Description of Respondent:**

Alias: \_\_\_\_\_

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex: \_\_\_\_ Age: \_\_\_\_ Height: \_\_\_\_ Weight: \_\_\_\_

Eye Color: \_\_\_\_ Hair Color: \_\_\_\_ Race: \_\_\_\_ Skin Tone: \_\_\_\_

Soc. Sec. No.: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Other ID No.: \_\_\_\_ Place of Birth: \_\_\_\_

Describe any Scars, Marks, Beards, Tattoos, etc.: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Days and Hours: \_\_\_\_\_

**Description of Respondent's Vehicle:**

Drivers Lic. No.: \_\_\_\_\_ Issuing State: \_\_\_\_\_ Expiration Year: \_\_\_\_\_

Vehicle Lic. No.: \_\_\_\_\_ Vehicle Year: \_\_\_\_\_ Issuing State: \_\_\_\_\_ Type: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color(s): \_\_\_\_\_ VIN: \_\_\_\_\_

**Does the Respondent:**

Carry a weapon or keep a weapon nearby? \_\_\_\_ Where and what kind? \_\_\_\_\_ Have a history of mental illness? \_\_\_\_ Use or abuse alcohol or drugs? \_\_\_\_ What kind? \_\_\_\_\_ Have a history of violence toward others? \_\_\_\_ Make threats against law enforcement? \_\_\_\_ Other Comments: \_\_\_\_\_

\_\_\_\_\_