



# Civil Protection Order/Civil Stalking Order Case

## CLIENT INFORMATION

1. Your Name (First, Middle, Last) \_\_\_\_\_

2. Your Social Security Number \_\_\_\_\_

3. Your Date Of Birth \_\_\_\_\_

4. Your Address \_\_\_\_\_

5. Your Home Phone Number \_\_\_\_\_

6. Your Cell Phone Number \_\_\_\_\_

7. Your Email \_\_\_\_\_

8. Your Work Phone Number \_\_\_\_\_

9. Were You and the Opposing Party Ever Married?            Yes            No

10. If So, When? \_\_\_\_\_

11. Date Separated/Divorced \_\_\_\_\_

12. Children's Name	Age	Date Of Birth	Soc Sec.
A. _____	_____	_____	_____
B. _____	_____	_____	_____
C. _____	_____	_____	_____
D. _____	_____	_____	_____

Children's Addresses For The Previous 5 Years:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. Opposing Party's Full Name (First, Middle, Last) \_\_\_\_\_

14. Their Social Security Number \_\_\_\_\_

15. Their Date Of Birth \_\_\_\_\_

16. Their Address \_\_\_\_\_  
\_\_\_\_\_

17. Their Driver's License Number \_\_\_\_\_

18. Are You Defending Against A Civil Protection Order?      Yes      No

19. If So, Please Skip To How You Heard About McDaniel Law Group.

20. Who Needs Protection? (Circle All Who Apply)

Me

My Minor Children

A Family/Household Member

Other \_\_\_\_\_

21. Do You Want An Ex Parte (Emergency) Protection Order?      Yes      No

22. What Is The Domestic Violence Victim's Relationship To Respondent \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

23. List The Names Of All Additional Individuals Who Need Protection \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





## HOW DID YOU HEAR ABOUT MCDANIEL LAW GROUP, LLC?

Please Circle one:

Business Card

Internet search

Website

Referral

Other

Please explain: \_\_\_\_\_