STATE OF OREGON
Marion County Circuit Courts
JUL 26 2017
FILED

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

In the Matter of :	Case No
_____, Petitioner,	
☐ Guardian Ad Litem and	**PETITION FOR STALKING PROTECTIVE ORDER** ORS 30.866
_____, Respondent.	

NOTICE TO PETITIONER

- You must provide complete and truthful information. If you do not, the court may dismiss the order and may also hold you in contempt of court.
- If you wish to have your residential address and telephone number withheld from the Respondent, use a contact address and telephone number so the court and sheriff can reach you.

1. ☒ I *(write your name)*, _____, request that the Court issue a Stalking Protective Order against *(write Respondent's name)* _____, requiring that Respondent stop all contact and avoid all contact with Petitioner (me).
2. I am _____ years old and a resident of Clackamas County, Oregon.
3. Respondent is _____ years old and a resident of Marion County, Oregon.
4. What is your relationship to Respondent? *(check one)*
   - ☐ Respondent is my spouse or former spouse.
   - ☐ Respondent is my registered domestic partner or former registered domestic partner.
   - ☐ Respondent and I have a child together.
   - ☐ Respondent and I cohabit (live together in sexually intimate relationship) or used to cohabit (live together in sexually intimate relationship).
   - ☐ I am Respondent's child.
   - ☐ I am a child of an intimate partner*of Respondent (*spouse/former spouse, parent of Respondent's child or cohabitant/former cohabitant).
   - ☐ Respondent and I are in dating relationship or used to be in a dating relationship.
   - ☐ Respondent is a family member. (*How are you and respondent related?* _____)
   - ☐ Respondent is a friend or former friend.
   - ☐ Respondent is a co-worker or used to be co-worker.
   - ☐ Respondent is a stranger.
   - ☒ other No-Relationship

To qualify for a stalking protective order:

- the Respondent must have intentionally, knowingly, or recklessly engaged in repeated and unwanted contact that alarmed (frightened) or coerced (forced) you or a member of your immediate family or household within the last two years,
- it is reasonable for you to feel alarmed or coerced and
- the contact made you reasonably fear for your physical safety or the safety of your household or family,

You must provide details describing the conduct by Respondent that is repeated and unwanted contact. If you do not state facts to back up this application, it may be denied.

Describe below in Section 5 any **unwanted contact** by Respondent within the **last two years.** List the most recent contact first, followed by the next most recent, etc. For each contact, write down the **location** (place), **date,** and **approximate time** of the contact. Explain what was alarming or coercive and who was alarmed or coerced.

At least two separate incidents of unwanted contact must have happened.

5A. Date/Time of last incident: July 13, 2017 at 4:49 PM

Location (include County and State): Email Correspondence, lives in Marion County, OR

Describe what happened and to whom: sent me an email with an attachment that said "Stop Snitching ." This was a follow-up email to an earlier email stating the police spoke to him because of me. We reported to Capitol Police and Salem police an email sent me on July 11, 2017 stating that the voices were making him want to kill me.

5B. Date/Time of earlier unwanted contact: July, 11 2017 6:44 PM

Location (include County and State): Email Correspondence, lives in Marion County, OR

Describe what happened and to whom: sent me an email stating that the voices in this head were making him want to kill me. His exact words were: "their doing what ever for me to kill you. They are making my body really anxity ive been really bugged out:"

5C. Date/Time of earlier unwanted contact: May 23, 2017 9:50 AM

Location (include County and State): ___ Street NE, Ste , Salem Oregon 97301

Describe what happened and to whom came to Congressman Schraders Salem District office to discuss genocide. received a letter stating that all future correspondnce needed to be done by mail to the Washington DC. came in and was very agitated and angry with me that I was not helping him with starting a militia to help him reform the government. That morning the security guard told us that man had come by and hid a knife in a flower pot

6. Explain why the unwanted contact was alarming or coercive: is clearly agitated and unstable. He carries a knife around and has tried to hide it by our outside our building, he has expressed that the voices in his head are making him want to kill me, and he has told me that he views me as part of the government that is doing experiments on him.

7. Explain why the unwanted contact has made you afraid for your personal safety or the safety of a family or household member: I work in downtown Salem, commute via bus to the transit center, and attend meetings in downtown Salem. I have seen Mr. outside in the streets. I also understand that Mr. has mental health issues and he is not currently getting treatment. His mental stability concerns me given the fact that he has expressed that the voices are making him want to kill me and has tried to hide a knife in our building.

8. Explain why Respondent knew or should have known that his/her conduct was unwanted: We have sent him a letter telling him that all correspondence with our office needs to be in writing to our D.C. office. When he last visited our office in person, I reminded him that he should not be there and must only contact our D.C. office in writing. Also, Mr. expressing that the voices are making him want to kill me is not behavior that is not welcome by anybody.

☐ I have attached an additional page(s) detailing more unwanted and alarming/coercing contacts, and/or giving more information about the contacts described above.

9A. Were any of the spoken or written contacts a **threat** that made you afraid that serious personal violence or physical harm would happen to you very soon?

☐ No. You do not need to fill out questions 9A – 9D and can go to Question 10.
☑ Yes. The spoken or written contact(s) I described in ☐5A ☑5B ☐5C were such a threat.

If you answered yes, you must also answer the following four questions:

9B. Why did you believe that the threat was directed to you: _____

Mr. wrote in his email to me that the voices are making want to kill me.

9C. Why did you believe that the Respondent **intended to carry out** that threat: _____

Mr. is mentally unstable and I'm unsure of what he is capable of. The tone of his emails is getting more and more aggressive and he has hid a knife in a planter.

9D. Why did you believe that the Respondent **had the ability to carry out** that threat: _____

Mr. carries a knife and I have seen him walking downtown Salem where I work

9E. Explain why that threat made you **afraid of imminent serious personal violence or physical harm:** _____

Mr. statement that the voices are making him want to kill me, makes me question his ability to control his thoughts and actions. I think he could snap at any moment.

10. I want the court to order Respondent to complete a mental health evaluation and any recommended treatment as part of the Permanent Stalking Protective Order. ☒ Yes ☐ No

11. I will need an interpreter in court. ☐ Yes ☒ No

12. I believe the Respondent will need an interpreter in court. ☐ Yes ☒ No

13. If I hire an attorney to represent me in this case, I am asking that the court award me attorney fees pursuant to ORS 30.866(4) (c). ☐ Yes ☒ No

Notice to Petitioner:
This petition must be completely filled out, signed, and acknowledged by a notary public or court clerk before a judge can hear it. If the information in the petition does not meet the statutory requirements for a Stalking Protective Order, the Court will deny the petition. If the order is granted, be sure to appear at all scheduled court appearances or the order may be terminated. To help protect you or a member of your immediate family or household, you should take steps to enforce the order by contacting the police when and if the Respondent violates the order. Even then, this order may not protect you or a member of your immediate family or household against the Respondent's actions. If you feel you or a member of your immediate family or household are in immediate danger, you should contact the police by dialing 911.

DATED this 27 day of July, 20 17

Signature of Petitioner — Print Name

[redacted], Wilsonville, OR 97070
Address or **Contact** Address — City, State, Zip — Telephone or **Contact** Telephone

State of Oregon)
County of Marion)

This instrument was SIGNED and SWORN to before me on ____, 20____, *(date)*
by _____ *(name of person(s)).*

Notary Public for _____/Court Clerk
My Commission Expires: _____

CIRCUIT COURT MARION COUNTY, OREGON

Certificate of Document Preparation. *(You are required to truthfully complete this certificate. Check all boxes and complete all blanks that apply):*

☒ I chose this document for myself and I completed it without paying for help.
☐ I paid or will pay money to _____ for helping me prepare this form.

Signature of Petitioner — Print Name

[redacted] OR 97070
Address or Contact Address — City, State, Zip — Telephone or Contact Telephone

I certify that this is a true copy:

Petitioner's Signature _____

Information about Respondent

(What you write in the blanks below will make it easier to find and serve the Respondent with the order and to take care of any safety concerns the officers serving the order may face.)

Address: Union Gospel Mission of Salem,

City/State/Zip: Salem, OR 97301

Birthdate: (See CIF)

Employer and Employer Address: (See CIF)

Place most likely found: Marion County Law Library

During what hours: Business Hours

Height/Weight: 5'8 / 250 lb Hair Color / Eye Color: Bald with Goatee

Physical Characteristics: Heavy set

Description of Vehicle:

Access to Weapons? If so, what type? Carries a knives

Arrested or convicted of violent crime? *Explain*

Danger to Others? To Respondent himself/herself? *Explain*

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

In the Matter of:	)	Case No.
,	)	
Petitioner,	)	
	)	NOTICE TO RESPONDENT
☐ Guardian Ad Litem	)	AND ORDER TO PERSONALLY
	)	APPEAR FOR HEARING
,	)	
Respondent.	)	

TO RESPONDENT: A STALKING PROTECTIVE ORDER HAS BEEN ISSUED BY THE COURT WHICH AFFECTS YOUR RIGHTS. THIS ORDER IS NOW IN EFFECT.

1. You, the Respondent, have been named as an alleged stalker in the attached petition. The Petition claims that you have intentionally, knowingly, or recklessly alarmed (frightened) or coerced (forced) the Petitioner or a member of the Petitioner's immediate family or household by engaging in repeated and unwanted contact with the other person. A Temporary Court's Stalking Protective Order has been entered against you by the court. **See attached copy of the Petition and Temporary Stalking Protective Order.**

2. You MUST appear at Marion County Circuit Court 100 High St NE Salem Oregon 97301
Name and Address of Courthouse

on)/ / at Courtroom 3A for a hearing.
Date *Time*

At the hearing, the court will determine whether or not to issue a Final Stalking Protective Order for an unlimited amount of time.

TO RESPONDENT: IF YOU FAIL TO ATTEND THE HEARING, THE COURT MAY ISSUE A WARRANT FOR YOUR ARREST AND A FINAL STALKING PROTECTIVE ORDER AGAINST YOU.

Violation of the Stalking Order

VIOLATION OF A STALKING PROTECTIVE ORDER, TEMPORARY OR FINAL, IS A CRIME. The crime is a Class A Misdemeanor, but if you have a prior conviction for Stalking or Violating a Stalking Protective Order, a violation is a Class C Felony.

STATE OF OREGON
Marion County Circuit Courts
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IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR MARION COUNTY

☒ Petitioner	Case No.:
and	NOTICE OF FILING OF ☒ CONFIDENTIAL INFORMATION FORM (CIF) ☐ AMENDED CIF (Stalking)
☒ Respondent	

NOTICE: Confidential Information Form Has Been Filed

- Uniform Trial Court Rule (UTCR) 2.130 requires that parties to stalking cases place certain information about themselves and other parties in a CIF when such information is required in a document filed with the court.
- The CIF is not available for public inspection except as authorized by law.
- Parties are allowed to see a CIF that contains information about them.
- A party who wants to see a CIF that contains information about another party must ask for permission from the court or the other party by following the procedures set out in UTCR 2.130.

I am the (check one box):
☒ Petitioner ☐ Respondent

I filed Confidential Information Forms with the court about the following parties to this case (*complete a section for each party for whom you have filled out a CIF*):

1) Name (Last, First, Middle):
☒ Petitioner ☐ Respondent

Confidential Personal Information contained in CIF (check all that apply):

☒ party's date of birth
☐ children's date of birth, ☐ employer's name, address, and telephone number

STATE OF OREGON
Marion County Circuit Courts
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IN THE CIRCUIT COURT OF THE STATE OF OREGON
COUNTY OF MARION

In the Matter of :	Case No.
	☑ TEMPORARY STALKING PROTECTIVE ORDER
_____, Petitioner,	☐ FINAL STALKING PROTECTIVE ORDER AND JUDGMENT
☐ Guardian Ad Litem and	☐ ORDER OF CONTINUANCE
_____, Respondent.	☐ JUDGMENT OF DISMISSAL

This matter came before this Court on _____ *(date)* for hearing on issuance of a:

☑ **Temporary Stalking Protective Order**

☐ **Final Stalking Protective Order and Judgment.**

PETITIONER: ☑ Appeared in person ☐ Did not appear ☐ With attorney _____

RESPONDENT: ☐ Appeared in person ☐ Did not appear ☐ With attorney _____

The court considered the allegations made in the Petition and other evidence offered and **FINDS:**

☐ (*For Temporary Order*) probable cause that:

☐ (*For Final Order and Judgment)* by a preponderance of the evidence that:

1. ☑ Respondent has engaged intentionally, knowingly, or recklessly in repeated and unwanted contact with the Petitioner or a member of the Petitioner's immediate family or household, and it was reasonable for Petitioner to be alarmed or coerced by this contact.

2. ☑ Respondent knew or should have known that the repeated contact was unwanted.

3. ☑ It is objectively reasonable for a person in Petitioner's situation to have been alarmed or coerced by Respondent's contact.

4. ☑ Respondent's repeated and unwanted contact caused the Petitioner reasonable apprehension regarding the Petitioner's own personal safety or the safety of a member of his/her immediate family or household.

5. ☑ Respondent represents a credible threat to the physical safety of Petitioner or Petitioner's or Respondent's child/ren.

6. ☑ The unwanted contact occurred within two years of the filing of this action.

IT IS FURTHER ORDERED THAT:

An ex parte hearing on **TEMPORARY** relief having been held:

9. ☒ **Respondent must appear** at a hearing on this Temporary Stalking Protective Order on 31 / AUG / 2012 *(date)* and 10:00 am *(time)* in Room 3A of the Marion Co. Courthouse County Courthouse to show cause why the Temporary Stalking Protective Order should not be continued for an indefinite period. The Temporary Stalking Protective Order issued on 26 / JUL / 2012 *(date)* shall be enforceable against the Respondent until terminated by the court or until service upon the Respondent of a Final Stalking Order. *See attached* **"Notice to Respondent and Order to Personally Appear For Hearing."**

10. ☐ **NO** Temporary Stalking Protective Order shall issue, as the Court finds Petitioner has not proven a basis for such order.

A hearing on **PERMANENT** relief having been set for today after notice to the Respondent:

11. **CONTINUANCE**
☐ The hearing shall be CONTINUED to ____/____/____ *(date)* and _____ *(time)* in Room _____ of the _____ County Courthouse. The Stalking Protective Order issued on ____/____/____ *(date)* shall remain in effect pending this hearing.

12. **WARRANT**
☐ A Warrant for Respondent's arrest shall issue because Respondent did not appear. Security amount is set at ☐ $5,000 / ☐ $_____.

13. **DISMISSAL**
☐ The Temporary Stalking Protective Order issued on ____/____/____ *(date)* shall be terminated and the Petition dismissed, as the Court finds that Petitioner has not proven the basis for this order or
☐ Petitioner did not appear.

14. **VOLUNTARY DISMISSAL**
☐ The Temporary Stalking Protective Order issued on _____ *(date)* shall be terminated and the Petition dismissed, as the Court finds that Petitioner has made such a request voluntarily.

15. **FINAL ORDER AND JUDGMENT**
☐ **The court has ordered the continuation of the terms of the restraint detailed above in Paragraph 8. This Order is a Final Judgment and is of unlimited duration unless modified by law or by further order of the court.**

16. **ATTORNEY FEES**
☐ Pursuant to ORS 30.866(4)(c), Petitioner is awarded attorneys fees in the amount of $_____.
☐ Other order regarding award of attorneys fees to Petitioner: _____

☐ C. Terms of Order:

The Order restrains Respondent from harassing, stalking or threatening Petitioner or Petitioner's or Respondent's child/ren or engaging in other conduct that would place Petitioner in reasonable fear of bodily injury to Petitioner or Petitioner's or Respondent's child/ren; **AND**

Respondent represents a credible threat to the physical safety of Petitioner or Petitioner's or Respondent's child/ren; **OR**

This Order by its terms explicitly prohibits the use, attempted use, or threatened use of physical force against Petitioner or Petitioner's or Respondent's child/ren that would be reasonably expected to cause bodily injury.

FULL FAITH AND CREDIT PROVISIONS: This Order meets all full faith and credit requirements of the Violence Against Women Act, 18 USC §2265. This Court has jurisdiction over the parties and the subject matter. Respondent was or is being afforded notice and timely opportunity to be heard as provided by Oregon law. This Order is valid and entitled to enforcement in this and all other jurisdictions.

Judge Signature:

JUL 26 2017

Certificate of Document Preparation and Readiness for Judicial Signature. 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.

This proposed order is ready for judicial signature under UTCR 5.100 because this order is submitted ex parte as allowed by statute or rule, or is otherwise not required pursuant to UTCR 5.100(3), or by statute, rule, or otherwise.

Print Name, ☒ Petitioner ☐ Attorney for Petitioner ☐ OSB No. *(if applicable)*

Address or Contact Address
Use a Safe Contact address

City, State, Zip: Wilsonville, OR 97070

Telephone or Contact Telephone Number
Use a Safe Contact number

Dated: 7/26/2017 Submitted by (signature): _____