

PROTECTION ORDER INSTRUCTIONS DURING SHUTDOWN

1. Complete all forms.
2. For assistance with completing the Protection Order forms, help is available Monday through Friday, from 9:00 a.m. to 4:00 p.m. Please call:

<u>Stepstone:</u>	316-833-0760
<u>Wichita Area Sexual Assault Center:</u>	316-361-1177
<u>Wichita Family Crisis Center:</u>	316-351-3623
<u>Protection Order Liaison hot-line:</u>	316-660-5290
<u>Catholic Charities Harbor House:</u>	316-263-6000

For further assistance completing your forms you may email your forms to protectionorder@dc18.org or fax to **316-941-5365**

Interpreter needed for this hearing. Language _____

3. When the forms are completed, send the entire packet (including this sheet) to the Protection office by: **SCAN** and **EMAIL** to protectionorder@dc18.org; or FAX - 316-941-5365;

These locations have a fax machine for use:

<u>Fedex</u>	Find your closest location	\$1.60 /\$1.89 per page
<u>UPS</u>	Find your closest location	\$1.00 per page
<u>TheMailRoom</u>	2020 W 21st St	\$1.25/ \$1.00 per page after first page
<u>CartridgeWorld</u>	7130 W Maple St #290	\$2.00 flat rate
<u>CartridgeWorld</u>	2250 N Rock Rd Suite 130	\$2.00 flat rate
<u>47th Mail and Print</u>	4925 S Broadway, Wichita	\$1.00 per page incoming & outgoing

4. Fill out the following information below **and the clerk will return your copies to you.** This information **WILL NOT** be filed with the court file.

Name: _____

Phone number: _____

Email: _____

Fax: _____

Address: _____

City, state, zip: _____

GENERAL INSTRUCTIONS FOR THOSE ASKING FOR
A PROTECTION FROM STALKING, SEXUAL ASSAULT, OR
HUMAN TRAFFICKING ORDER

NOTICE

The protection from stalking, sexual assault, or human trafficking process is designed to provide quick and immediate protection. However, the process may require time, expertise, or more than one hearing. If you have questions, you should ask for help from an attorney or victim services advocate. The Kansas Crisis Hotline (1-888-363-2287) or Kansas Legal Services (1-800-723-6953) may be able to help you find an attorney or advocate.

These are basic forms and they do not cover every situation. The Clerk of the District Court cannot help you with these forms. The clerk cannot give legal advice to you or tell you about your rights or responsibilities. The clerk can only provide very limited information about the protection order process. You can find more information about protection from stalking, sexual assault, or human trafficking at

www.kcsdv.org/learn-more.html and

<https://www.kansaslegalservices.org/node/2036/pfa-tips-tricks-part-1-preparing-your-pfapfs>.

1. You may ask for a protection from stalking, sexual assault, or human trafficking order:
 - a. For yourself;
 - b. For your minor child;
 - c. For a minor child who resides with you;
 - d. For a minor child for whom you are the child's court-appointed legal custodian or legal guardian.

You may ask a county or district attorney or the attorney general to file for a protection order for a child who is a human trafficking victim.

2. Stalking, sexual assault, or human trafficking must have occurred against each person for whom protection is sought.

“Stalking” is an intentional harassment of another person that places the other person in reasonable fear for that person's safety.

“Sexual assault” is (1) a nonconsensual sexual act; or (2) an attempted sexual act against another by force, threat of force, duress or when the person is incapable of giving consent.

“Harassment” is a knowing and intentional course of conduct directed at a specific person that seriously alarms, annoys, torments or terrorizes the person and that serves no legitimate purpose.

“Course of conduct” is conduct consisting of two or more separate acts over a period of time, however short, that show a continuity of purpose which would cause a reasonable person to suffer substantial emotional distress.

“Human trafficking” is any act that would constitute human trafficking or aggravated human trafficking, as defined by K.S.A. 21-5426, or commercial sexual exploitation of a child, as defined by K.S.A. 21-6422, or an act that, if committed by an adult, would constitute selling sexual relations, as defined by K.S.A. 21-6419.

“Human trafficking victim” is a person who has been subject to an act that would constitute human trafficking or aggravated human trafficking, as defined by K.S.A. 21-5426, or commercial sexual exploitation of a child, as defined by K.S.A. 21-6422, or has committed an act that, if committed by an adult, would constitute selling sexual relations, as defined by K.S.A. 21-6419.

3. You may file a **Petition for Protection from Stalking, Sexual Assault, or Human Trafficking Order** in any district court. In addition, you must complete the **Protection from Stalking, Sexual Assault, or Human Trafficking Confidential Information Form** and include it with your petition.
4. You must notify the defendant by personal service that you have filed a **Petition for a Protection from Stalking, Sexual Assault, or Human Trafficking Order**. To obtain personal service, you must fill out a **Request for Service form**, asking that the sheriff deliver the **Petition for Protection from Stalking, Sexual Assault, or Human Trafficking** to the defendant.
5. If the defendant is a minor, you must complete the **Minor Defendant Addendum**. Petitions, motions and temporary protection from stalking, sexual assault, or human trafficking orders filed against a minor defendant must be served by serving the minor **and**:
 - a. The minor’s guardian or conservator, if any; **or**,
 - b. The minor's father or mother; **or**,
 - c. A person having the minor's care or control; **or**,
 - d. A person with whom the minor resides.

If service cannot be made upon any of these people, then service may be obtained as provided by order of the judge.

6. You should be available to testify at future hearings as set by the judge. If you fail to appear, the case may be dismissed. You are the one asking for the protective order, and you must convince your judge of what you claimed to be true. You may bring other evidence and call additional witnesses in support of your claim.
7. Your final protection order will expire after one year or on the date stated in the order unless you ask for an extension from the court before the order expires.

Extension for One Year

To ask for a one-year extension, you can use the form titled “**Motion to Extend Final Protection from Stalking, Sexual Assault, or Human Trafficking Order for One Additional Year.**” You must file the motion with the clerk of the district court and mail a copy of the motion to the defendant. You must file your motion to extend the order before your order ends. It is a good idea to file the motion at least a month before your order ends because this process can take several weeks.

Extension for two or more years

If the defendant has violated a protection order or been convicted of a person felony against you or a member of your household, you may ask the court to extend the protection order for two years or longer. You can use the form titled “**Motion to Extend Final Protection from Stalking, Sexual Assault, or Human Trafficking Order for Two Additional Years or Up to Life.**” The motion asking to extend an order for two years or longer must be filed with the clerk of the district court and then personally served on the defendant. The court must hold a hearing where the defendant may appear, present evidence, and question witnesses. You must file your motion to extend the order before your order ends. It is a good idea to file the motion at least a month before your order ends because this process can take several weeks.

8. *Wireless Telephone Number(s)*

You may ask the court to transfer the rights to and the billing responsibility from the defendant to you for the wireless telephone numbers used by you and/or the children in your care. If the court grants your request, the court will complete an **Order Transferring Wireless Telephone Number(s)**. You must send a copy of the file-stamped **Order Transferring Wireless Telephone Number(s)** and the **Confidential Information for Order Transferring Wireless Telephone Number(s)** to the wireless service provider’s agent for service of process listed with the secretary of state.

IN THE DISTRICT COURT OF _____ COUNTY, KANSAS

_____, Plaintiff

vs.

Case No. _____

_____, Defendant

PROTECTION FROM STALKING, SEXUAL ASSAULT, OR HUMAN TRAFFICKING
CONFIDENTIAL INFORMATION FORM

(K.S.A. 60-31a04(e))

NOTE: THIS FORM WILL BE SHOWN ONLY TO AUTHORIZED COURT OR LAW ENFORCEMENT PERSONNEL. THIS FORM WILL NOT BE DISCLOSED TO THE PUBLIC OR TO THE DEFENDANT. IT IS THE PLAINTIFF'S RESPONSIBILITY TO NOTIFY THE COURT OF ANY CHANGE IN ADDRESS OR TELEPHONE NUMBER OR EMAIL.

Name of Plaintiff: _____

Confidential Address:

Street _____

City _____ State _____ Zip Code _____

Phone Number _____

Email _____

(give a phone number and email that are not controlled or accessible by the defendant)

SERVICE COVER SHEET AND NCIC INFORMATION FORM

THIS FORM IS NOT TO BE INCLUDED IN THE PUBLIC RECORD AND SHOULD BE DESTROYED ONCE THE REQUIRED INFORMATION IS ENTERED IN THE NCIC FILE.

This information is intended to be used by law enforcement to identify the defendant for enforcement of the order and for entry into the National Crime Information Center (NCIC) database. Please fill out the information as completely and correctly as possible, be particularly careful with the dates of birth and spelling of names. PLEASE PRINT.

If there is more than one person being protected by the order (i.e. children), use the second page to provide information about each protected person.

Restrained Person/Defendant's Name: <div style="border: 1px solid black; height: 20px; width: 350px; margin-top: 5px;"></div> Any other name(s) Defendant has been known by: _____ _____ Defendant can be found at (give all available addresses): Home Address: _____ _____ Phone number(s): _____ Times Defendant is usually there _____ _____ Place of employment: _____ _____ Phone number(s): _____ Times Defendant is usually there _____ _____ Other Address: _____ _____ Phone number(s): _____ Times Defendant is usually there _____ _____	Restrained Person/Defendant Identifiers: (Please include all available information.) <table border="1" style="width: 100%;"><tr><td>SEX</td><td>RACE</td><td>DOB</td><td>HT</td><td>WT</td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td>HAIR</td><td>EYES</td><td colspan="3">SOCIAL SECURITY NUMBER</td></tr><tr><td> </td><td> </td><td colspan="3"> </td></tr><tr><td colspan="2">DRIVERS LICENSE #</td><td>DL STATE</td><td colspan="2">DL EXP. DATE</td></tr><tr><td colspan="2"> </td><td> </td><td colspan="2"> </td></tr><tr><td colspan="2">VEHICLE MAKE</td><td>VEHICLE MODEL</td><td colspan="2">VEHICLE YEAR</td></tr><tr><td colspan="2"> </td><td> </td><td colspan="2"> </td></tr></table> Distinguishing Features (tattoos, scars, locations frequented, etc.): Please describe: _____ _____ _____ _____ _____ _____ Does Defendant wear glasses? <input type="checkbox"/> Yes <input type="checkbox"/> No Does Defendant own or possess any weapons? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what kind(s)? _____ _____ _____ _____	SEX	RACE	DOB	HT	WT						HAIR	EYES	SOCIAL SECURITY NUMBER								DRIVERS LICENSE #		DL STATE	DL EXP. DATE							VEHICLE MAKE		VEHICLE MODEL	VEHICLE YEAR						
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VEHICLE MAKE		VEHICLE MODEL	VEHICLE YEAR																																						
Protected Person's Name: <div style="border: 1px solid black; height: 20px; width: 320px; margin-top: 5px;"></div> Relationship to Defendant: <input type="checkbox"/> are or <input type="checkbox"/> have been in a dating relationship <input type="checkbox"/> reside together or <input type="checkbox"/> formerly resided together <input type="checkbox"/> have a child in common	Protected Person's Identifiers: Full Date of Birth (mm/dd/yyyy) <div style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></div> <i>(It is important to include the protected person's full date of birth)</i> Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Race _____																																								

SERVICE COVER SHEET AND NCIC INFORMATION FORM

Other Protected Persons Information

Protected Person's Name: <div></div> Relationship to Defendant: <input type="checkbox"/> are or <input type="checkbox"/> have been in a dating relationship <input type="checkbox"/> reside together or <input type="checkbox"/> formerly resided together <input type="checkbox"/> have a child in common	Protected Person's Identifiers: Full Date of Birth (mm/dd/yyyy) <div></div> <i>(It is important to include the protected person's full date of birth)</i> Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Race _____
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01-24-13 CASE # _____

**SEDGWICK COUNTY SHERIFF'S OFFICE
PROTECTIVE ORDER WORKSHEET**

Please supply all requested information and any other information that will assist deputies with serving the defendant. Please attach a recent photograph if available. Supplying false information may result in criminal prosecution and civil penalties.

No attempt at service will be made without an address for the Defendant.

PLAINTIFF INFORMATION

Name: _____ Date of Birth: _____

Race: _____ Sex: _____ Social Security Number: _____

Driver's License No. _____ State of Issue _____

Daytime Phone: _____ Cell Phone: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

DEFENDANT INFORMATION

Name: _____ Date of Birth: _____

Race: _____ Sex: _____ Social Security Number: _____

Age: _____ Height: _____ Weight: _____ Hair: _____ Eyes: _____

Tattoos/Scars or other Identifiers: _____

Driver's License No. _____ State of Issue _____

Place of Birth: _____

Daytime Phone: _____ Cell Phone: _____ Work Phone: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Vehicle Description: _____

BEST ADDRESS FOR SERVICE DURING BUSINESS HOURS (8-5): _____

WORK/SCHOOL/OTHER LOCATION FOR SERVICE:

Name of Business/School/Other Location: _____

Address: _____ Days There: Su M Tu W Th F Sa Time: _____
(Please Circle)

Work Phone: _____

****FOR OFFICE USE ONLY****

RMS _____

Circle One: PFA PFS

☐ IN CUSTODY

COURT HEARING DATE: _____

☐ MINOR ☐ ADULT ON BEHALF

BEAT AREA: _____

1st Attempt at SERVICE:

2nd Attempt at SERVICE:

3rd Attempt at SERVICE:

DEPUTY'S NOTES:

IN THE DISTRICT COURT OF _____ COUNTY, KANSAS

Plaintiff

vs.

Case No. _____

Defendant

Petition Pursuant to K.S.A. Chapter 60

**PETITION FOR PROTECTION FROM STALKING, SEXUAL ASSAULT,
OR HUMAN TRAFFICKING ORDER**
(K.S.A. 60-31a01 *et seq.*)

1. Plaintiff seeks an order for protection from stalking, sexual assault, or human trafficking for:

a. ☐ myself;

OR

b. ☐ a minor child (under age 18)

Plaintiff is:

- ☐ the parent of the child
- ☐ an adult who resides with the child
- ☐ the child's court appointed legal custodian
- ☐ the child's court-appointed legal guardian
- ☐ a county or district attorney
- ☐ the Kansas attorney general

The minor child's name and year of birth are:

Minor Child's Name: _____

Year of Birth: _____

2. Defendant can be served at: *(please provide all available addresses)*

HOME: street _____ city _____

state _____ zip code _____ phone number _____

times when defendant is usually there _____

WORK: street _____ city _____
state _____ zip code _____ phone number _____
times when defendant is usually there _____

OTHER: street _____ city _____
state _____ zip code _____ phone number _____
times when defendant is usually there _____

4. If the defendant is a minor, a Minor Defendant Addendum is attached.
5. List any other related court cases involving Plaintiff, minor child (*if applicable*), or Defendant.
(*give type of case, county filed in, case number and date filed, if known*)

Plaintiff:

Minor Child:

Defendant:

6. *Select and complete either section A, B, or C. Attach more pages as needed.*

☐ A. Describe the incidents of stalking. Include specific facts, dates and locations:

Incident #1: _____

Incident #2: _____

Additional Incident(s), if any:

OR

☐ **B.** Describe the incident of sexual assault. Include specific facts, dates and locations:

OR

☐ **C.** Describe the incident of human trafficking. Include specific facts, dates, and locations:

7. Plaintiff/child needs a protection from stalking, sexual assault, or human trafficking order because: _____

8. Plaintiff requests that the court issue an ex parte Temporary Order of Protection and Final Order of Protection restraining defendant from:
- ☐ abusing, molesting or interfering with the privacy or rights of the protected person.
 - ☐ following, harassing, telephoning, contacting or otherwise communicating with the protected person.
 - ☐ committing or attempting to commit a sexual assault upon the protected person.
 - ☐ following, harassing, telephoning, contacting, recruiting, harboring, transporting, or committing or attempting to commit human trafficking upon the protected person.
 - ☐ entering or coming around the residence or area of the protected person.
 - ☐ other: _____
 - ☐ other: _____
9. *(Check box if you are asking for the transfer of wireless telephone numbers. Leave box blank if you are not asking for the transfer of wireless telephone numbers.)*
- ☐ Plaintiff asks the court to order the transfer of rights to and billing responsibility for the wireless telephone number of
☐ **Plaintiff and/or** ☐ **minor child(ren)** in the care of Plaintiff.
10. The court should give copies of orders to the appropriate law enforcement agencies; set a date, time and hearing on this matter; and issue summons to Defendant, notifying Defendant of this action and the relief requested.
11. After a hearing, the court should issue a Final Order of Protection from Stalking, Sexual Assault, or Human Trafficking prohibiting Defendant from committing any acts of stalking, sexual assault, or human trafficking against the protected person; order Defendant to pay court costs and attorney fees if appropriate; and order any other relief necessary for the safety of the protected person including:

VERIFICATION

I verify under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct. Executed on _____, 20____.

Plaintiff's Signature

Plaintiff's Name: _____

(DO NOT include the residential address of Plaintiff in this petition. Plaintiff must complete the Protection from Stalking, Sexual Assault, or Human Trafficking Confidential Information form and include it with this petition.)

Attorney representing Plaintiff (if any)

Attorney's Name: _____

Address 1: _____

Address 2: _____

City, State, Zip: _____

Telephone: _____

IN THE DISTRICT COURT OF _____ COUNTY, KANSAS
Protection from Stalking, Sexual Assault, or Human Trafficking (K.S.A. 60-31a01 *et seq.*)

Temporary Order of Protection from Stalking, Sexual Assault, or Human Trafficking

Judge or Division:	Case Number: Court ORI Number:																														
Plaintiff: <div style="border: 1px solid black; height: 20px; width: 250px; margin: 10px 0;"></div> vs.	Protected Person Identifiers: Name: _____ Year of Birth _____ Sex: _____																														
Defendant: <div style="border: 1px solid black; height: 20px; width: 250px; margin: 10px 0;"></div> Address _____ _____ _____	Defendant Identifiers: <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%;">SEX</td><td style="width: 15%;">RACE</td><td style="width: 15%;">YOB</td><td style="width: 15%;">HT</td><td style="width: 15%;">WT</td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td>HAIR</td><td>EYES</td><td colspan="3">LAST 4 DIGITS OF SSN (<i>IF KNOWN</i>)</td></tr><tr><td> </td><td> </td><td colspan="3"> </td></tr><tr><td colspan="2">DRIVERS LICENSE #</td><td>DL STATE</td><td colspan="2">DL EXP. DATE</td></tr><tr><td colspan="2"> </td><td> </td><td colspan="2"> </td></tr></table>	SEX	RACE	YOB	HT	WT						HAIR	EYES	LAST 4 DIGITS OF SSN (<i>IF KNOWN</i>)								DRIVERS LICENSE #		DL STATE	DL EXP. DATE						
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HAIR	EYES	LAST 4 DIGITS OF SSN (<i>IF KNOWN</i>)																													
DRIVERS LICENSE #		DL STATE	DL EXP. DATE																												

Protected Person: _____ (*name*)

This order and its terms are directed at and apply to Defendant only.

**THIS TEMPORARY ORDER SHALL REMAIN IN EFFECT UNTIL
SERVICE OF THE FINAL ORDER OR UNTIL TERMINATED BY ORDER
OF THE COURT.**

ONLY THE COURT CAN CHANGE THIS ORDER.

The Court Finds: (*Only the provision(s) initialed by the judge apply.*)

_____ Plaintiff filed a written verified petition on _____, 20____ requesting a Temporary Order of Protection from Stalking, Sexual Assault, and Human Trafficking.

_____ This Court has jurisdiction over Plaintiff, Defendant and subject matter.

_____ Plaintiff has established a *prima facie* case of stalking, sexual assault, or human trafficking sufficient for the court to issue a temporary order of protection from stalking, sexual assault, or human trafficking.

_____ A hearing has been set for _____, 20____, at ____:____ ☐ a.m. ☐ p.m. at _____ (Court) and summons has been issued.

Order

The Court Orders:

- Plaintiff's address and telephone number shall remain confidential for the protection of the Protected Person.
- Defendant shall not follow, harass, abuse, molest, assault, threaten, stalk, or interfere with the privacy rights of the Protected Person, and the Protected Person's family or household. [NCIC 01 & 02]
- Defendant shall not enter or come on or around the premises, the residence, the property, school, or place of employment of the Protected Person or other family or household member. [NCIC 04]
- Defendant shall not communicate in any manner with the Protected Person, the Protected Person's employer, employees, fellow workers, or others with whom the communication would be likely to cause annoyance or alarm the Protected Person. [NCIC 05]
- Defendant shall not direct or request another to contact the Protected Person, either directly or indirectly. [NCIC 04 & 05]
- Defendant shall not commit or attempt to commit a nonconsensual sexual act against the Protected Person.
- Defendant shall not commit or attempt to commit a sexual act against the Protected Person by force, threat of force, duress, or when the Protected Person is incapable of giving consent.
- Defendant shall not follow, harass, telephone, contact, recruit, harbor, transport, or commit or attempt to commit human trafficking upon the Protected Person.

CERTIFICATE OF COMPLIANCE WITH THE VIOLENCE AGAINST WOMEN ACT (VAWA):

This Order meets all the requirements of the Violence Against Women Act, 18 U.S.C. § 2265. This Court has jurisdiction of the parties and the subject matter; Defendant has been afforded notice and a timely opportunity to be heard as provided by the laws of Kansas. This Order is enforceable in all 50 states, the District of Columbia, all Indian tribal courts and all United States territories and shall be enforced as if it were an order of that jurisdiction pursuant to 18 U.S.C. § 2265.

Additional terms of this order are set forth below, if any.

Other Provisions:

_____ 1. Other orders necessary to promote the safety of the Protected Person:

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

SO ORDERED:

Date

Judge of the District Court

WARNINGS TO DEFENDANT

- **This order is effective when signed by the judge. Law enforcement officials shall immediately enforce this order.**
- **Violation of this order may constitute an offense under chapter 21 of the Kansas Statutes Annotated, including, but not limited to: violation of a protective order as provided in K.S.A. 21-5924, and amendments thereto; a sex offense under article 55 of chapter 21 of the Kansas Statutes Annotated, and amendments thereto; stalking as provided in K.S.A. 21-5427, and amendments thereto; assault as provided in K.S.A. 21-5412(a), and amendments thereto; battery as provided in K.S.A. 21-5413(a), and amendments thereto; and criminal trespass as provided in K.S.A. 21-5808(a)(1)(C), and amendments thereto, and may result in prosecution and conviction under Kansas criminal statutes.**
- **Violation of this order may also be punishable as contempt of this court.**
- **If Defendant has a concealed carry license, that license is subject to revocation pursuant to K.S.A. 75-7c07, and amendments thereto. After a defendant's concealed carry license has been revoked, continuing to carry a concealed weapon may constitute a violation of K.S.A. 21-6302, and amendments thereto.**
- **Violation of this order may subject Defendant to prosecution for such federal crimes, including but not limited to: Interstate travel to commit domestic violence; Interstate stalking; and Interstate violation of a protection order.**

Notice of Extension of this Temporary Order (Pursuant to K.S.A. 60-31a05)

If a hearing on the petition for protection is continued, the court may extend this Temporary Order of Protection from Stalking, Sexual Assault, or Human Trafficking for additional periods of time as it deems necessary.

Notice of Default (Pursuant to K.S.A. 60-255)

If you fail to appear at the hearing, a default order may be entered against you and this Temporary Order of Protection from Stalking, Sexual Assault, or Human Trafficking may turn into a Final Protection from Stalking, Sexual Assault, or Human Trafficking without further notice to you.

IN THE DISTRICT COURT OF SEDGWICK COUNTY, KANSAS

Plaintiff

vs.

Defendant

Defendant address:

Case No. _____

PERSONAL SERVICE ONLY

SUMMONS AND NOTICE OF HEARING FOR PROTECTION ORDER

To the above-named defendant:

You are notified that the attached petition for protection was filed against you in this court and that the court
☐ **has entered** the attached temporary orders, or ☐ **has not entered** temporary orders against you.

A hearing on this matter has been scheduled on:

Date: _____, 20____

Time: _____ ☐ a.m. ☐ p.m.

Place: **Sedgwick County Courthouse, 525 N Main, Wichita, KS 67203, 1st Floor Jury Room.**

Children are not allowed in the courtroom during this docket.

If you do not attend the hearing, final orders may be issued against you. You may appear and cross-examine the plaintiff's witnesses and present evidence as to why the orders sought should not be granted. You may file an answer or counter-petition but are not required to do so. You have the right to appear with or without an attorney.

Date: _____



Clerk of the District Court/Deputy

RETURN OF SERVICE OF SUMMONS

☐ I certify under penalty of perjury that I have served this summons and notice of hearing:

By personally delivering on the _____ day of _____, 20____, at _____:_____ ☐ a.m. ☐ p.m.,
a copy of the summons and a copy of the petition and temporary orders (if any) to the above named defendant.

All done in _____ County, Kansas.

☐ I certify under penalty of perjury that I was not able to personally serve this summons and notice of hearing.

Date: _____

Sheriff/Deputy