

**CPO REPORT**

**FOR LAW ENFORCEMENT PURPOSES ONLY**

**THE INFORMATION CONTAINED IN THIS REPORT IS INTENDED TO AID LAW ENFORCEMENT OFFICERS IN THE SERVICE AND ENFORCEMENT OF THE PROTECTION ORDER.**

INITIATED BY:

CASE # \_\_\_\_\_

- VICTIMS ASSISTANCE
- ONEEIGHTY
- OTHER \_\_\_\_\_

Petitioner's/Victim's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Address where staying, if different \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name and address of parent(s) or other close relative \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Name and address of employer \_\_\_\_\_

Occupation \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Normal work hours/days \_\_\_\_\_

**PLEASE RETURN TO ISSUING AGENCY**

Date _____	Additional Comments _____
Time Served _____	_____
Place Served _____	_____
Personal Service _____	_____

COURT OF COMMON PLEAS, DIVISION OF DOMESTIC RELATIONS  
WAYNE COUNTY, OHIO

**CPO REPORT**

Respondent's (Assailant) Name \_\_\_\_\_

Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Physical Description: Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ Race \_\_\_\_\_  
Sex \_\_\_\_\_ Scars and/or Tattoos \_\_\_\_\_

Vehicle Description: Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_  
Color \_\_\_\_\_ License# \_\_\_\_\_ State \_\_\_\_\_

Name and address of parent(s) or other close relative \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Name and address of employer \_\_\_\_\_

Occupation \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Normal work hours/days \_\_\_\_\_

Places frequented \_\_\_\_\_

Dangerous? \_\_\_\_\_ If yes, why? \_\_\_\_\_

Does the Respondent use drugs or engage in excessive use of alcohol? \_\_\_\_\_ If yes, please  
furnish details \_\_\_\_\_

Is the Respondent on parole or probation? \_\_\_\_\_ If yes, county and name of parole or probation  
officer \_\_\_\_\_

History of mental illness or use of drugs \_\_\_\_\_

Does Respondent carry a gun? \_\_\_\_\_ If yes, the type and where is it normally carried? \_\_\_\_\_

Does respondent carry any other type of weapon? \_\_\_\_\_ If yes, the type and where is it normally  
carried? \_\_\_\_\_

Is there any history of violence in the Respondent's family background? \_\_\_\_\_ If yes, please  
explain \_\_\_\_\_