



ORDER OF PROTECTION GUIDE McHENRY COUNTY SHERIFF – SERVICE DATA SHEET

Case #: _____ Issued: _____ Expires: _____
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Petitioner/ Protected Address	Name: _____ DOB: _____ Address(es): _____ Phone #: _____ Relationship to Respondent: _____
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Proof of Service: <input type="checkbox"/> Email*: _____ <input type="checkbox"/> Mail: _____

Respondent	Name: _____ DOB: _____ Sex: _____ Race: _____ HGT: _____ WGT: _____ Beard: _____ Eyes: _____ Address: _____ Apt #: _____ City: _____ State: _____ Telephone: _____ Employer: _____ Telephone: _____ Working Hours: _____ Other Locations: _____ Respondent's Car: Make: _____ Model: _____ Year: _____ Color: _____ Registration: _____
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Who might the respondent be staying with?

Would those they are staying with be cooperative with law enforcement?

Who might they be hanging out with?

Additional Information: _____ _____ _____ _____

*Preferred method