CIVIL ACTION FILE NO.	
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REMOVE THIS PAGE FROM ORDER AND FILE SEPARATELY UNDER SEAL

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*For transmittal to the Georgia Protective Order Registry and, if applicable,

the National Crime Information Center.*

RESPONDENT'S IDENTIFYING FACT SHEET (please complete as much as possible; one of these must be provided to have the order placed in the National Crime Information Center registry: Respondent's date of birth OR social security number)		
Respondent's social security number is	, date of birth is, sex, color of hair	
, color of eyes, height _	, weight Respondent's race is,	
ethnic background Responde	ent has distinguishing marks (tattoos, scars,	
etc.) Respondent drive	es a, license tag	
no:(Expires:) and has a(state) driver's license no:(Expires:).		
Respondent's home address and is employed		
by at	and works from to on	
(days) Respondent has the following known aliases:		
PROTECTED PARTIES' IDENTIFYING INFORMATION		
Petitioner: DOB	sex race	
Other: DOB	sex race	
Other: DOB	sex race	
Other:DOB	sex race	
Other: DOB	sex race	
☐ Transmitted to Georgia Protective Order Registry Date Clerk		