HELP FOR PEOPLE FILING A PROTECTION ORDER

If you are a victim of violence, abuse, or harassment and believe you are in immediate danger, call 9-1-1.

For help locating emergency services in your area, call 2-1-1.

SEXUAL ASSAULT/HARASSMENT HELP	DOMESTIC VIOLENCE HELP
Sexual Assault & Harassment Statewide 27/7 Hotline	Domestic Violence Statewide 27/7 Hotline
1-800-871-7741	1-800-834-HELP
mecasa.org	mcedv.org

More Sexual Assault and Domestic Violence Help

Tribal Sexual Assault & Domestic Violence 27/7 Hotline Numbers

Wabanaki Women's Coalition

Micmac Advocacy Center • (207) 551-3639 Maliseet Advocacy Center • (207) 532-6401

Indian Township Passamaquoddy Advocacy Center • (207) 214-1917

Passamaquoddy Peaceful Relations Advocacy Center • 1-877-853-2613

Penobscot Nation Advocacy Center • (207) 631-4886

How can an advocate help me?

An advocate is a trained person who can help a victim of violence, abuse, or harassment to:

- Give you information about protection orders and help you understand what happens in court;
- Help you file court paperwork and find legal help;
- Go with you to your hearing and give you support and information;
- Help you with other services like housing, counseling, support groups, and mental health help;
- Help make sure you are safe; and
- Provide information on how to file for a protection order if you are under 18.

LEGAL HELP

Maine State Bar Association Lawyer Referral Service
1-800-860-1460 or www.mainebar.org/page/AttorneyRequest
(30-minute consultation with a lawyer for \$25 administrative fee)

Legal Services for the Elderly 1-800-750-5353 or www.mainelse.org

MORE INFORMATION	
To learn more about the court process to get a protection order, please review <u>A Guide to Protection from Abuse and Harassment Cases</u> or scan the QR code on the right.	
To learn more about how to file for a protection order by email , please visit the Maine Judicial Branch website or scan the QR code on the right.	

	Plaintiff	DISTRICT COURT
individually and on behalf of:		Location (Town):
		Docket No.:
on behalf of:		
V.		
	Defendant	
on behalf of:		
		AINT OR MOTION TO EXTEND PROTECTION ORDER
Р	MO-SJC-3; M	.R.E.C.S. 31-40
PLEASE NOTE: This form is required only f	or complaint	s for a protection order or a motion to extend a
protection order that are filed electronica	lly (either by	email or through eFileMaine). If you want to file in
person at a courthouse, you do not need to	o complete th	nis form.
If you wish to speak to an advocate, you o	an call the fr	ee and confidential statewide hotline for the Maine
Coalition to End Domestic Violence at 1-8	66-834-4357	or the Maine Coalition Against Sexual Assault at 1-
800-871-7741.		
1. To file a complaint or motion to exten	nd in a protec	ction order case electronically, you must check that
you understand the following:	na m a protec	ston order case electromeany, you must one extende
<u>, oa amaciotana mo iono min</u>		
I UNDERSTAND I must have acces	ss to a safe pl	none number and a safe email that I can check
	•	the clerk will contact me by email to (1) tell me if the
		ction, or (2) if needed, to schedule a time for me to call
the court so the judge can ask for	=	
I UNDERSTAND if the court sched	dules me for a	a call with the judge (the defendant will not be on the
<u> </u>		not be dismissed but my request for a temporary
order may be denied.	•	
☐ I UNDERSTAND that filing by ema	ail does <u>not</u> m	nean I am automatically protected. A judge must review
<u> </u>		orary order or temporarily extend my existing
protection order.	•	

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk. **Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

MAINE JUDICIAL BRANCH I UNDERSTAND that any filings received electronically on a weekend, legal holiday, during a court closure, or after 3:00 p.m. on a weekday will not be reviewed until the next business day. I UNDERSTAND that I may file electronically without oath and notarization only if I check the box on the court's complaint or motion to extend form that says: "I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000.00 if I give false information to the court." I UNDERSTAND that all documents filed by email must be in Word or PDF format. All documents filed by eFileMaine must be in PDF format, and each form/document must be submitted individually as separate files within the same filing or "envelope". Photographs of documents and hyperlinks to documents will **not** be opened or reviewed by the court. If you cannot agree to all the above, you should go to the court to file in person. Please visit the following website for a list of courts by city or town: https://www.courts.maine.gov/maine_courts/findacourt/court_by_town.shtml 2. Safe Email to Schedule Call with Judge To file electronically, you must provide a safe email for the court to contact you in case the judge has questions and needs to schedule a call with you. Not all cases will need a call with the judge. If you do not have a safe email, you should go to the court to file in person. Safe email: ____ Safe phone number: _ Check here if you would like the clerk to also call you with your scheduled time. Please note that the clerk may be calling from a number that displays the caller ID (not a blocked number) and will not leave a voicemail if you do not pick up.

3. Court Selection

I want to file this matter in (court location/town name)

District Court.

Visit the following website for a list of courts by city or town: https://www.courts.maine.gov/maine courts/findacourt/court by town.shtml

- 4. Method of Electronic Filing (please select one option below)
 - a. I want to file **by email** (this option is available for all courts, but **only for complaints and** motions to extend without a filing fee).

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk. **Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

Pleas	e email your filing to the regional email address for the court where you want to file:
0	Region 1 (Biddeford District Court): region1pafilings@courts.maine.gov
0	Region 2 (Bridgton and Portland District Courts): region2pafilings@courts.maine.gov
0	Region 3 (Farmington, Lewiston, Rumford, and South Paris District Courts):
	region3pafilings@courts.maine.gov
0	Region 4 (Augusta, Skowhegan, and Waterville District Courts):
	region4pafilings@courts.maine.gov
0	Region 5 (Bangor, Dover-Foxcroft, Lincoln, Millinocket, and Newport District Courts):
	region5pafilings@courts.maine.gov
0	Region 6 (Belfast, Rockland, West Bath, and Wiscasset District Courts):
	region6pafilings@courts.maine.gov
0	Region 7 (Calais, Ellsworth, and Machias District Courts):
	region7pafilings@courts.maine.gov
0	Region 8 (Caribou, Fort Kent, Houlton, Madawaska, and Presque Isle District Courts):

region8pafilings@courts.maine.gov

I want to file using eFileMaine (this option is available for all complaints and motions to

b. I want to file using **eFileMaine** (this option is available for all complaints and motions to extend, but **only in the following District Courts: Bangor, Lewiston, South Paris, Farmington, and Rumford**).

To file using eFileMaine, please visit: https://www.courts.maine.gov/ecourts/efile.html

5. Completing the Forms

After you have completed this form, complete the other forms in the protection from abuse packet, protection from harassment packet, or the motion to extend protection order packet as instructed. You must then electronically file the completed packet, including this form, whether you are submitting the filing by email to the regional email address or through eFileMaine.

FILING CERTIFICATION. I hereby certify that there are good grounds to support this pleading and that it i	s not
peing filed to cause any delay.	

, , , , , , , , , , , , , , , , , , , ,	
Date (mm/dd/yyyy):	▶ /s/
	Name of filing party or filing party's attorney
	(Tyning your name above will be accepted by the

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, <u>accessibility@courts.maine.gov</u>, or a court clerk.

Language Services: For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

court as an electronic signature.)

	Plaintiff	DISTRICT CO	URT		
individually and on behalf of:		Location (To			
	_	Docket No.:			
	_				
on behalf of:					
	_				
	_				
V.					
••					
	Defendant				
on behalf of:	_				
	_				
COMPLAIN	T FOR RECTION				
COMPLAIN		N FROM HARASSMEN	l I		
	5 M.R.S. §§ 465	or et seq.			
NOTE: You must file form PA-027 if you are f	iling this electroni	cally. Failure to do so	will result in	rejection of t	he
Complaint.					
1. Plaintiff information:					
Gender: Female Male Other					
Date of Birth (mm/dd/yyyy):					
Do NOT list your contact information below	if it is to be kept co	onfidential. Instead, c	omplete forn	າ PA-015, Affi	idavit
for Confidential Address, which can be obtain	ned from the clerk	or at <u>www.courts.m</u>	aine.gov.		
Present street address (street address, city, st	ate):				
If different, mailing address:					
Telephone number:					
If filing this consultint on hobelf of a		: da 46 a fallai.a infa			
If you are filing this complaint on behalf of a r	ninor, piease provi	ide the following infor	mation:		
Minor's Name	Mino	or's Date of Birth	Minor's (Gender (<i>select</i>	t one)
	(mm)	/dd/yyyy)		•	,
			Male	Female	Other
			Male	Female	Other
			Male	Female	Other
			Male	Female _	Other
			Male	Female _	Other
			Male	Female _	_ Other
2 Defendant information.					
2. Defendant information:					
Full name:					
Gender: Female Male Other					
ADA Notice: The Maine Judicial Branch complies v	vith the Americans v	vith Disabilities Act (ADA). If you need a	reasonable	
accommodation, contact the Court Access Coordin	·				
Language Services: For language assistance and in	terpreters, contact a	a court clerk or <u>interpret</u>	ers@courts.ma	aine.gov.	

PA-006, Rev. 04/24 Complaint for Protection from Harassment

Date of Birth (mm/dd/yyyy):							
Race: White Black Asian or Pacific Islander American Indian or Alaskan Indian Unknown							
Present street add	ress:						
If different, mailing address:							
Telephone numbe	r:						
If you are filing thi	s complaint against a defendant on be	ehalf of a minor, please provid	le the fo	ollowing	informatio	on:	
Minor's Name		Minor's Date of Birth (mm/dd/yyyy)	Mi	nor's Ge	ender (<i>sele</i>	ct o	ne)
		(тту аа, уууу ј		Male	Female	\neg	Other
				Male	Female	<u> </u>	Other
				Male [Female [Other
				Male [Female [Other
				Male [Female [Other
				Male	Female [Other
concerning to Divorce Divorce Concerning to Divorce Concerning to Divorce Concerning to Divorce Concerning to Divorce to	not been involved in any way in, and the custody of the child(ren) named in or family matter action on from abuse a name change of milect the court in which the case was five custody matter describe what kind of other case): any court orders awarding custody, visit any actions pending against either the	in this complaint, except as following Adoption of minor led: Probate Court Distribution, etc. for the child(ren)	ows: trict Co	urt court ord			ne
(a) This o	oose either (a) or (b): laim involves an allegation of domest semination of certain private images;	ic or dating violence, sexual a	ssault, s	stalking,	sex traffic	king	g or
	claim <u>does not involve</u> an allegation of r unlawful dissemination of certain pri		sexual	assault,	stalking, se	∋x	
5. You must ch	oose either (a) or (b):						
§ 506-A to d	e attached to this Complaint a copy of efendant to stop harassing me (or the					7-A∣	M.R.S.
OR							
	e not sought/obtained from law enfor						
	hose behalf I am filing this Complaint					.5 9	
	ine Judicial Branch complies with the Amntact the Court Access Coordinator, acces	-	-		easonable		
	For language assistance and interpreters,				ne.gov.		

	4651(2)(C), or relates to an allegation of:
	 domestic violence; violence against a dating partner; sexual assault; stalking; or harassment as described in 17-A M.R.S. §§ 506(1)(A-1) or (A-2).
6.	Explain why you are asking for protection from the defendant – who, what, when, where, etc. (If additional space is needed, attach another sheet).

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk. **Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

MO	ΓΙΟΝ	FOR TEMPORARY ORDER (OPTIONAL)
	ness p	diate and present danger of physical abuse or extreme emotional distress from the defendant's conduct or property is in immediate and present danger of suffering substantial damage as a result of the defendant's use:
I therefo	re re	quest that a temporary order for protection from harassment be issued.
REQUES	T FOI	R RELIEF (you must select one or more of the options below)
I ASK	(a) (b) (c)	Order the defendant to stop harassing me. Order the defendant to have no direct or indirect contact with me. Order the defendant not to enter my residence. Order the defendant to refrain from repeatedly, and without reasonable cause, following me or being at, or in the vicinity of, my home, school, business, or place of employment. Order the defendant to refrain from interfering with my property. Order the defendant to remove, destroy or return the private images or direct the removal, destruction or return of same, order the defendant to stop disseminating the private images, and further order the defendant not to disseminate the private images at any time in the future. Order the defendant to pay monetary compensation for losses that I have incurred as the result of the harassment. Order the defendant to pay my attorney fees and court costs and to order any other necessary and proper relief. Order the defendant to refrain from destroying, transferring, or tampering with my passport or any other Immigration documents.
You are	herel	by put on notice that it is a crime to make a false statement under oath in a court document:
stateme	nts a	nder penalty of perjury that the above statements are true and correct. I understand that these are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up prison and a fine of up to \$5,000.00 if I give false information to the court.
Date (<i>mr</i>	n/dd,	/yyyy): >
		Signature of Plaintiff

PLEASE NOTE: If you are <u>not</u> filing this complaint electronically, you must have a clerk or notary sign below. If you are filing this complaint electronically, you may file it without notarization as long as you checked off the above certification and signed this document.

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk.

 $\textbf{Language Services:} \ For language \ assistance \ and \ interpreters, \ contact \ a \ court \ clerk \ or \ \underline{interpreters@courts.maine.gov}.$

STATE OF MAINE

COUNTY		
Personally appeared the above named, made oath that the foregoing statements are true under pen		and
Date (<i>mm/dd/yyyy</i>):	•	
	Clerk Notary Public Attorney	

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk. **Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

PROTECTION ORDER SERVICE INFORMATION

	DEFENDANT				
Home Address: Apartment number and/or floor: Color of house or other description: If living with another person, other person's name: Telephone: home/work/cell: Hours defendant will most likely be at home: Name of Employer: Work Address: Work Schedule:	Defendant's Name:				
Color of house or other description: If living with another person, other person's name: Telephone: home/work/celt: Hours defendant will most likely be at home: Name of Employer: Work Address: Work Schedule: Mon Tues Wed Thurs Fri Sat Sun Hours Worked: MM PM PM To MAM PM PHYSICAL DESCRIPTION (If known) Birth Date (mm/dd/yyyy): Make and Year (yyyy): Height: Type/Model: Color: Hair Color: Registration No. and State: Eye Color: Registration No. and State: Eye Color: Other Gender: Race: White Black Asian or Pacific Islander American Indian/Alaskan Native Other If you are unable to provide the above information, please list below the name, address, and telephone number of anyone who can help the serving officer locate the defendant: ADDITIONAL INFORMATION Does the defendant own a firearm or other weapon, answer the following questions: Describe the weapon(s): Where is/are the weapon(s) usually kept? Include the address where the weapon(s) are usually kept and describe the location of the weapon(s) (i.e., under the bed), if known: Does the defendant have a history of violence?					
If living with another person, other person's name: Telephone: home/work/cell: Hours defendant will most likely be at home: Name of Employer: Work Address: Work Address: Work Schedule:	Apartment number and/or floor:				
If living with another person, other person's name: Telephone: home/work/cell: Hours defendant will most likely be at home: Name of Employer: Work Address: Work Address: Work Schedule:	Color of house or other description:				
Hours defendant will most likely be at home: Name of Employer: Work Address: Work Schedule: Mon Tues Wed Thurs Fri Sat Sun Hours Worked: AM PM to MM PM PHYSICAL DESCRIPTION (If known) Birth Date (mm/dd/yyyy): Make and Year (yyyy): Type/Model: Weight: Color: Hair Color: Registration No. and State: Eye Color: Gender: Race: White Black Asian or Pacific Islander American Indian/Alaskan Native Other If you are unable to provide the above information, please list below the name, address, and telephone number of anyone who can help the serving officer locate the defendant: ADDITIONAL INFORMATION Does the defendant own a firearm or other weapon, answer the following questions: Describe the weapon(s): Where is/are the weapon(s) usually kept? Include the address where the weapon(s) are usually kept and describe the location of the weapon(s) (i.e., under the bed), if known: Does the defendant have a history of violence?					
Name of Employer: Work Address: Work Schedule:	Telephone: home/work/cell:				
Work Address: Work Schedule:	Hours defendant will most likely be at home:				
Work Address: Work Schedule:	Name of Employer:				
Hours Worked: AM PM to AM PM PHYSICAL DESCRIPTION (If known) Birth Date (mm/dd/yyyy):					
PHYSICAL DESCRIPTION (If known) Birth Date (mm/dd/yyyy):	Work Schedule: Mon Tues Wed Thurs	Fri 🗌 Sat 🗌 Sun			
Birth Date (mm/dd/yyyy):	Hours Worked: AM PM to] AM [] PM			
Height:	PHYSICAL DESCRIPTION (If known)	VEHICLE (If known)			
Height:	Birth Date (mm/dd/yyyy):	Make and Year (yyyy):			
Weight: Color:		Type/Model:			
Hair Color: Registration No. and State: Eye Color: Gender: Race: _ White _ Black _ Asian or Pacific Islander _ American Indian/Alaskan Native _ Other If you are unable to provide the above information, please list below the name, address, and telephone number of anyone who can help the serving officer locate the defendant: ADDITIONAL INFORMATION Does the defendant own a firearm or other weapon? _ No _ Yes If the defendant owns a firearm or other weapon, answer the following questions: Describe the weapon(s): Where is/are the weapon(s) usually kept? Include the address where the weapon(s) are usually kept and describe the location of the weapon(s) (i.e., under the bed), if known: Does the defendant have a history of violence?		Color:			
Gender:					
Race: White Black Asian or Pacific Islander American Indian/Alaskan Native Other If you are unable to provide the above information, please list below the name, address, and telephone number of anyone who can help the serving officer locate the defendant: ADDITIONAL INFORMATION Does the defendant own a firearm or other weapon? No Yes If the defendant owns a firearm or other weapon, answer the following questions: Describe the weapon(s): Where is/are the weapon(s) usually kept? Include the address where the weapon(s) are usually kept and describe the location of the weapon(s) (i.e., under the bed), if known: Does the defendant have a history of violence?	Eye Color:				
If you are unable to provide the above information, please list below the name, address, and telephone number of anyone who can help the serving officer locate the defendant: ADDITIONAL INFORMATION Does the defendant own a firearm or other weapon? No Yes If the defendant owns a firearm or other weapon, answer the following questions: Describe the weapon(s): Where is/are the weapon(s) usually kept? Include the address where the weapon(s) are usually kept and describe the location of the weapon(s) (i.e., under the bed), if known: Does the defendant have a history of violence?	Gender:	-			
ADDITIONAL INFORMATION Does the defendant own a firearm or other weapon? No Yes If the defendant owns a firearm or other weapon, answer the following questions: Describe the weapon(s): Where is/are the weapon(s) usually kept? Include the address where the weapon(s) are usually kept and describe the location of the weapon(s) (i.e., under the bed), if known: Does the defendant have a history of violence?	Race: White Black Asian or Pacific Islander	American Indian/Alaskan Native 🗌 Other			
Does the defendant own a firearm or other weapon? No Yes If the defendant owns a firearm or other weapon, answer the following questions: Describe the weapon(s): Where is/are the weapon(s) usually kept? Include the address where the weapon(s) are usually kept and describe the location of the weapon(s) (i.e., under the bed), if known: Does the defendant have a history of violence?	•	•			
Where is/are the weapon(s) usually kept? Include the address where the weapon(s) are usually kept and describe the location of the weapon(s) (i.e., under the bed), if known: Does the defendant have a history of violence?	Does the defendant own a firearm or other weapon? If the defendant owns a firearm or other weapon, answer	-			
describe the location of the weapon(s) (i.e., under the bed), if known: Does the defendant have a history of violence?		de the address where the weapon(s) are usually kept and			
	Does the defendant have a history of violence?				
is there anything else the serving officer should know about the defendant:					
	is there anything else the serving officer should know ab	out the defendants			
PLAINTIFF	PLAINTIFF				
Plaintiff's Name:	Plaintiff's Name:				
Address (unless confidential):					
Telephone: home/work/cell (unless confidential):	Telephone: home/work/cell (unless confidential):				

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk. **Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

Individually and on behalf of: Docket No.:		Plaintiff	DISTRICT COURT
Defendant	individually and on behalf of:		Location (Town):
V. Defendant		_	Docket No
Defendant On behalf of:	on behalf of:	-	
Defendant On behalf of:		-	
Defendant On behalf of:	V	-	
AFFIDAVIT OF CONFIDENTIAL ADDRESS 19-A M.R.S. § 4112(1), 5 M.R.S. § 4556 PLEASE NOTE: When your contact information is confidential, the court cannot give your information to an advocate from a domestic violence or sexual assault community agency to call you. An advocate can help you find legal help, explain what happens in court, and go with you to court. If you want help from an advocate, call one of the numbers on the second page of this form. I am the plaintiff defendant in this case and I request that the court keep the following information confidential: Physical address: Brail address:	v .		
AFFIDAVIT OF CONFIDENTIAL ADDRESS 19-A M.R.S. § 4112(1), 5 M.R.S. § 4656 PLEASE NOTE: When your contact information is confidential, the court cannot give your information to an advocate from a domestic violence or sexual assault community agency to call you. An advocate can help you find legal help, explain what happens in court, and go with you to court. If you want help from an advocate, call one of the numbers on the second page of this form. I am the plaintiff defendant in this case and I request that the court keep the following information confidential: Physical address: Mailing address: Home _		Defendant	
PLEASE NOTE: When your contact information is confidential, the court cannot give your information to an advocate from a domestic violence or sexual assault community agency to call you. An advocate can help you find legal help, explain what happens in court, and go with you to court. If you want help from an advocate, call one of the numbers on the second page of this form. I am the plaintiff defendant in this case and I request that the court keep the following information confidential: Physical address: Hailing address: Home H	on behalf of:		
PLEASE NOTE: When your contact information is confidential, the court cannot give your information to an advocate from a domestic violence or sexual assault community agency to call you. An advocate can help you find legal help, explain what happens in court, and go with you to court. If you want help from an advocate, call one of the numbers on the second page of this form. I am the plaintiff defendant in this case and I request that the court keep the following information confidential: Physical address: Hailing address: Home H		-	
PLEASE NOTE: When your contact information is confidential, the court cannot give your information to an advocate from a domestic violence or sexual assault community agency to call you. An advocate can help you find legal help, explain what happens in court, and go with you to court. If you want help from an advocate, call one of the numbers on the second page of this form. am the			
domestic violence or sexual assault community agency to call you. An advocate can help you find legal help, explain what happens in court, and go with you to court. If you want help from an advocate, call one of the numbers on the second page of this form. I am theplaintiffdefendant in this case and I request that the court keep the following information confidential:physical address:	13,		,, 5 M.M.S. § 4050
happens in court, and go with you to court. If you want help from an advocate, call one of the numbers on the second page of this form. I am the plaintiff defendant in this case and I request that the court keep the following information confidential: Physical address: Mailing address: Email address: Telephone number: Cell Home			- -
this form. I am the plaintiff defendant in this case and I request that the court keep the following information confidential: Physical address:	-		
am the		u want neip from	an advocate, call one of the numbers on the second page of
Physical address: Mailing address: Email address: Telephone number: Cell Home Other (): I state under oath that the health, safety, or liberty of myself and/or my child(ren) would be jeopardized by disclosure of this information for the following reasons: I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy):			
Mailing address: Email address: Cell Home Home State under oath that the health, safety, or liberty of myself and/or my child(ren) would be jeopardized by disclosure of this information for the following reasons: I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy): Signature of plaintiff defendant	I am the \square plaintiff \square defendant in this case a	nd I request that	the court keep the following information confidential:
Mailing address: Email address: Cell Home Home State under oath that the health, safety, or liberty of myself and/or my child(ren) would be jeopardized by disclosure of this information for the following reasons: I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy): Signature of plaintiff defendant	Physical address:		
Telephone number:	Mailing address:		
Work Other (): I state under oath that the health, safety, or liberty of myself and/or my child(ren) would be jeopardized by disclosure of this information for the following reasons: I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy): Signature of plaintiff defendant STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.			_
I state under oath that the health, safety, or liberty of myself and/or my child(ren) would be jeopardized by disclosure of this information for the following reasons:			
information for the following reasons: I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy):	Other ():
information for the following reasons: I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy):			/au man abild/man)d ba is a mandisad bu diaglacuma of this
☐ I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy): Signature of ☐ plaintiff ☐ defendant STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.	•	rty of myself and,	for my child(ren) would be Jeopardized by disclosure of this
made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy): Signature of plaintiff defendant STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.			
made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy): Signature of plaintiff defendant STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.			
made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy): Signature of plaintiff defendant STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.			
made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy): Signature of plaintiff defendant STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.	_		
fine of up to \$5,000 if I give false information to the court. Date (mm/dd/yyyy): Signature of plaintiff defendant STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.			
Date (mm/dd/yyyy): Signature of plaintiff defendant STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.			ution for perjury punishable by up to 5 years in prison and a
Signature of plaintiff defendant STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.	· -		
STATE OF MAINE COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.	Date (mm/dd/yyyy):	▶	•
COUNTY Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.			Signature of plaintiff defendant
Personally appeared the above-named, and made oath that the foregoing statements are true under penalty of perjury.		STATE OF I	MAINE
	COUNTY		
Date (mm/dd/yyyy):	Personally appeared the above-named, and made	de oath that the fo	oregoing statements are true under penalty of perjury.
Attorney at Law Notary Public Clerk	Date (mm/dd/yyyy):		•
			Attorney at Law Notary Public Clerk
ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable	<u> </u>		
accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov , or a court clerk. Language Services: For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov .			

Help For People Filing Protection Orders

If you are a victim of violence, abuse, or harassment and believe you are in immediate danger, call 9-1-1.

For help locating emergency services in your area, call 2-1-1.

Sexual Assault/Harassment Help	Domestic Violence Help
Sexual Assault & Harassment Statewide 24/7 Hotline	Domestic Violence Statewide 24/7 Hotline
1-800-871-7741	1-866-834-HELP
mecasa.org	mcedv.org

More Sexual Assault and Domestic Violence Help

Tribal Sexual Assault & Domestic Violence 24/7 Hotline Numbers

Wabanaki Women's Coalition

Micmac Advocacy Center • (207) 551-3639

Maliseet Advocacy Center • (207) 532-6401

Indian Township Passamaquoddy Advocacy Center • (207) 214-1917

Passamaquoddy Peaceful Relations Advocacy Center • 1-877-853-2613

Penobscot Nation Advocacy Center • (207) 631-4886

Immigrant & Refugee Sexual Assault & Domestic Violence Help

Immigrant Resource Center of Maine • (207) 753-0061

How can an advocate help me?

An advocate is a trained person who can:

- Give you information about protection orders and help you understand what happens in court;
- Help you file court paperwork and find legal help;
- Go with you to your hearing and give you support and information;
- Help you with other services like housing, counseling, support groups, and mental health help;
- Help make sure you are safe; and
- Provide information on how to file for a protection order if you are under 18.

Legal Help

Maine State Bar Association Lawyer Referral Service 1-800-860-1460 www.mainebar.org/page/AttorneyRequest (\$25 administrative fee to help individuals find a private lawyer; includes a 30-minute consultation.)

Legal Services for the Elderly 1-800-750-5353 www.mainelse.org

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk. **Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

PROTECTION FROM ABUSE OR PROTECTION FROM HARASSMENT: WHAT KIND OF CASE SHOULD I FILE?

Protection from Abuse (PFA)

Protection from Harassment (PFH)

Regardless of your age, you can file a PFA against your family or household member or your current or former dating partner who has abused you. (Please note that if you are a minor child, your parent or other person responsible for you will have to file the PFA on your behalf.)

Regardless of your age, you can also file a PFA <u>against</u> <u>anyone</u> who has:

- stalked you;
- sexually assaulted you;
- used or threatened to use intimate private images of you or against you;
- has forced you or led you into sex trafficking;
 or
- knowingly removed or tampered with a condom, knowingly used a damaged condom, or misrepresented intentions to use a condom during a consensual sexual act.

If you are 60 or older, or a dependent or incapacitated adult, you can file a PFA <u>against a family member or unpaid care provider</u> if that person has abused you.

If you are a minor, your parent or other person responsible for you can get a PFA on your behalf against anyone who has:

- sexually exploited you;
- shared or intends to share sexually explicit images of you (only if you are 16 or under); or
- harassed you by telephone or by electronic devices.

Regardless of age, you can file a PFH **against anyone** if you have been a victim of that person's:

- Harassment (which means three or more acts of intimidation, confrontation, actual or threatened physical force by the defendant, made with the intention of causing fear, intimidation, or damage to personal property, and that do in fact cause fear, intimidation, or damage to personal property);
- A single act or course of conduct constituting a serious criminal act, such as:
 - assault,
 - o criminal threatening,
 - o sexual assault,
 - o terrorizing,
 - o kidnapping,
 - aggravated assault,
 - o arson,
 - o violation of privacy, or
- Violation or interference with your constitutional or civil rights.

(Please note that if you are a minor child, your parent or other person responsible for you will have to file the PFH on your behalf.)

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk. **Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

PA-028, Rev. 10/23
Protection from Abuse or Protection from
Harassment: What Kind of Case Should I File?

KEY DIFFERENCES: PROTECTION FROM ABUSE v. PROTECTION FROM HARASSMENT

Protection from Abuse (PFA)	Protection from Harassment (PFH)
A temporary protection order may be available without earlier notice to the defendant. If a temporary order is <u>not</u> granted, the plaintiff can decide to withdraw the complaint or go ahead, with a final hearing to be heard within 21 days.	In most cases, the plaintiff must first ask law enforcement to serve a "cease harassment" notice on the person harassing the plaintiff before filing a PFH complaint.
There are no fees to file a PFA complaint or have law enforcement serve the complaint and temporary order (if any) on the defendant.	There may be fees to file a PFH complaint and have law enforcement serve the complaint and temporary order (if any) on the defendant. There are no fees for complaints that are based on allegations of domestic or dating violence, stalking, sexual assault, sex trafficking, or unlawful dissemination of certain private images.
A business cannot file a PFA complaint.	A business can file a PFH complaint.
The court will hold a hearing on a PFA complaint within 21 days after the complaint is filed.	The court will hold hearing on the PFH complaint at the earliest available date, but it might not be held within 21 days.
An initial final PFA order can last up to two years.	An initial final PFH order can last up to one year.
A temporary or final PFA order can prohibit the defendant from having firearms, ammunition, or other dangerous weapons.	The court generally does not prohibit the defendant from having firearms, ammunition, or other dangerous weapons.

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk. **Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

PA-028, Rev. 10/23
Protection from Abuse or Protection from Harassment: What Kind of Case Should I File?

RESOURCES

HELP FOR PEOPLE FILING A PROTECTION ORDER

If you are a victim of violence, abuse, or harassment and believe you are in immediate danger, call 9-1-1.

For help locating emergency services in your area, call 2-1-1.

SEXUAL ASSAULT/HARASSMENT HELP	DOMESTIC VIOLENCE HELP
Sexual Assault & Harassment Statewide 24/7 Hotline 1-800-871-7741 mecasa.org	Domestic Violence Statewide 24/7 Hotline 1-866-834-HELP mcedv.org

More Sexual Assault and Domestic Violence Help

Tribal Sexual Assault & Domestic Violence 24/7 Hotline Numbers

Wabanaki Women's Coalition

Micmac Advocacy Center • (207) 551-3639 Maliseet Advocacy Center • (207) 532-6401 Indian Township Passamaquoddy Advocacy Center • (207) 214-1917 Passamaquoddy Peaceful Relations Advocacy Center • 1-877-853-2613 Penobscot Nation Advocacy Center • (207) 631-4886

How can an advocate help me?

An advocate is a trained person who can help a victim of violence, abuse, or harassment to:

- Give you information about protection orders and help you understand what happens in court;
- Help you file court paperwork and find legal help;
- Go with you to your hearing and give you support and information;
- Help you with other services like housing, counseling, support groups, and mental health help;
- Help make sure you are safe; and
- Provide information on how to file for a protection order if you are under 18.

LEGAL HELP

Maine State Bar Association Lawyer Referral Service 1-800-860-1460 or

www.mainebar.org/page/AttorneyRequest (30-minute consultation with a lawyer for \$25 administrative fee) Legal Services for the Elderly 1-800-750-5353 or <u>www.mainelse.org</u>

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk. **Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

PA-028, Rev. 10/23 Page 3 of 3 <u>www.courts.maine.gov</u>

Protection from Abuse or Protection from Harassment: What Kind of Case Should I File?