IN THE DISTRICT COURT OF THE <\_DistrictName\_> JUDICIAL DISTRICT OF

THE STATE OF IDAHO, IN AND FOR THE COUNTY OF <\_CountyName\_>

|  |  |  |
| --- | --- | --- |
| <\_Style\_> |  | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No Contact Order I.C. 18-920 - I.C.R 46.2[ ]  Original [ ]  AmendedDR#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Law enforcement agency\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Expires at 11:59 p.m. on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or upon dismissal of this case, whichever occurs first |
|  Event Code: NCO |

 Protected Person(s) Identifiers: Defendant’s Identifiers:

|  |  |  |  |
| --- | --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name (First, Middle, Last)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth (optional)  |  |  | Date of Birth |
|  |
| Gender | Race |
|  |  |

TO THE DEFENDANT: You have been charged with or convicted of the following crime(s):

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|

|  |  |  |
| --- | --- | --- |
| Count | Statute | Charge Desc |
| <\_ChrgNum\_> | <\_ChrgStatute\_>  | <\_ChrgDesc\_> |

 |

Relationship to protected person(s), if any: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This COURT, having personal and subject matter jurisdiction, finds that a no contact order is appropriate and HEREBY ORDERS THAT, with regard to the protected person(s) named above, YOU must not engage in any of the following conduct:

Do not contact or attempt to contact, either personally or through another person, the protected person(s) named above in any manner, including: 1) do not communicate in person or in writing or through any electronic means, including telephone, email, text, through social networking, or facsimile 2) do not harass, stalk, threaten, use, attempt to use or threaten use of physical force, engage in any other conduct that would place the protected person(s) in reasonable fear of bodily injury 3) do not knowingly remain within \_\_\_\_ feet of the protected person(s) 4) do not go within and/or knowingly remain within \_\_\_\_ feet of the following address(es):

[01]

Protected person’s home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[04]

Protected person’s workplace: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Protected person’s school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

However, you may participate in legal proceedings involving you and the protected person(s), and you may communicate through attorneys about legal issues involving you and the protected person(s).

.

[ ]  **THERE ARE NO EXCEPTIONS TO THE ABOVE ORDER.**

[05]

[ ]  **THERE ARE EXCEPTIONS TO THE ORDER ABOVE AS FOLLOWS**:

 [ ]  to contact by telephone between .M. and .M.

 for the following purposes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 [ ]  to participate in court ordered mediation

 [ ]  to provide for the exchange of children between the protected person and defendant through: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 [ ]  to retrieve personal necessities from the residence/protected address one time through:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 [ ]  to respond to emergencies involving your natural or adopted children

 [ ]  other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[03]

[ ] IF THIS ORDER REQUIRES YOU TO LEAVE A RESIDENCE SHARED WITH THE PROTECTED PERSON, you may contact a law enforcement officer who may make arrangements to accompany you to the residence to remove items and tools necessary for employment and personal belongings. The officer may determine what constitutes necessary personal belongings.

Yes [ ] No [ ] Defendant appeared or had actual notice of this hearing and the opportunity to participate.

If NO, then upon service, Defendant is notified of the right to request a hearing before a judge on this Order. The request must be filed within 7 days of service. To request a hearing you must contact the clerk of the court at (address) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The court must hold a hearing within 14 days of the filing of the request and must provide notice of the hearing to the protected person and the parties.

***A violation of this order is a separate crime under Idaho Code § 18-920***, for which no bail will be set until you appear before a judge. The maximum penalty for a violation of this Order is one year in jail and/or up to a $1000 fine. However, if the violation is a third offense, the violation is a felony, which is punishable by imprisonment in the state prison for up to five years and/or up to a $5000 fine. *If any other Civil Protection Order or Criminal No Contact Order is in place you must abide by the terms in the most restrictive order*. Dismissal of any other order will not result in a dismissal of this Order. ONLY A JUDGE CAN MODIFY THIS NO CONTACT ORDER.

The court clerk must immediately send a copy of this Order to the Sheriff’s Office in the county in which this Order was originally issued for entry into record systems and must deliver or mail a copy of this Order to the protected person(s) listed above.

**IT IS SO ORDERED.**

 Dated: <\_CurrDate\_> <\_CaseJudOfficer\_>

Judge

**WARNINGS:** As a result of this Order, it may be unlawful for you to purchase or possess a firearm, including a rifle, pistol, or revolver, or ammunition pursuant to federal law under 18 U.S.C. § 922(g)(8) . If you have any questions whether these laws make it illegal for you to possess or purchase a firearm, you should consult an attorney.

This Order is valid and entitled to enforcement in each jurisdiction throughout the 50 states of the United States, the District of Columbia, all tribal lands, and all U.S. territories, commonwealths, and possessions and shall be enforced as if it were an order of that jurisdiction (18 U.S.C. § 2265).

I, the Defendant named above, acknowledge receipt of this order.

Defendant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Served by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Law Enforcement Id. #: \_\_\_\_\_\_\_\_ Date served:\_\_\_\_\_\_\_\_

**CERTIFICATE OF SERVICE**

 [ ]  I certify that on <\_CurrDate\_>, I served a copy of the attached to:

|  |  |  |
| --- | --- | --- |
|

|  |  |
| --- | --- |
|  <\_CCListAllParAddrCase\_> | [ ]  By mail[ ]  By email[ ]  By fax (number)       [ ]  By personal delivery[ ]  Overnight delivery/Fed Ex |

 |

 By: Deputy Clerk

**Return of Service Criminal No Contact Order**

CaseNumber

One Plaintiff Name vs. One Defendant Name

PLEASE SERVE A COPY OF THE FOLLOWING ON THE DEFENDANT:

CRIMINAL NO CONTACT ORDER

RETURN OF SERVICE

 The undersigned, a Peace Officer, hereby certifies that he/she served a true copy of these documents upon the DEFENDANT by delivering a copy to him/her on the \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_, at the hour of \_\_\_\_\_\_\_\_\_\_\_\_\_\_.m., at the location of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of Idaho.

 **DATED** this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

 **SIGNATURE OF SERVER**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_