

EXTREME RISK
PROTECTION ORDER PACKET
THE RESPONDENT IS UNDER 18



MUNICIPAL COURT OF BAINBRIDGE ISLAND

Process for Protection Order Hearings

Request for Temporary Order

When a person (also called a “party” in legal terms), requests a protection order against another person, the Court will review the written petition and documents submitted. The Judge may also ask you questions in open court.

The Judge will consider whether or not to issue a temporary order and set a full hearing. There are three things that may happen upon a request for a temporary protection order:

- (1) The Court issues a temporary protection order, good for up to 14 days and sets the matter for a Full Order Hearing;
- (2) The Court declines to issue a temporary protection order and sets the matter for a Full Order Hearing;
- (3) The Court finds that there are not sufficient grounds for a protection order and declines to issue a temporary order and set any further hearing.

If a temporary order is issued, it will be forwarded to the police department for service of the petition paperwork, temporary order, and notice of hearing. Bainbridge Island Police will serve all types of orders without requiring any service fees. Other police departments may charge service fees for personal service of harassment protection orders.

Full Order Hearing

When a person requests a protection order against another person, that person must be given notice. Notice is provided by in-person service of the temporary order and next hearing (typically by law enforcement). You should expect that all paperwork submitted to the court (except confidential law enforcement form) will be given to the person you are requesting an order against. Court actions must be public hearings and all paperwork must be shown to the other side.

If the party is not served prior to the next hearing, the Judge may reissue the temporary order and reset the hearing to allow for proper notice to be provided. If the requesting party fails to appear for the full order hearing, the matter will be dismissed. If the responding party is served properly according to legal requirements and fails to appear at the hearing, the Judge may issue the protection order against the person.

At the Full Order Hearing, the parties will be kept separated prior to the start of the hearing as much as possible. The parties will be present at the same time during the hearing. The Bainbridge Island Municipal Court has a security officer present for the hearing.

At the Full Order Hearing, the Court will review the evidence submitted, testimony, and any additional evidence submitted. Each party will have an opportunity to address the Judge.

Presentation of Evidence- Protection Order Hearings

Each court may have different rules and procedures regarding hearings. The following is information to assist you with your upcoming protection order hearing at the Bainbridge Island Municipal Court. If your hearing is transferred to Kitsap County Superior Court, different rules may apply.

Full Order Hearing

At the full order hearing, the Court will consider the written petition and any additional evidence presented and that the Judge deems relevant to the matter.

Each side will have an opportunity to present his/her side to the Judge. You are not required to have a lawyer for a protection order hearing and many parties appear "pro se" (representing oneself). If you would like to have a lawyer represent you, you must hire an attorney in advance of the hearing at your own expense. "Evidence" is what you present in court to prove your side of the case. Evidence can be your statements (called "testimony"), documents or photos. The following are examples of the types of evidence that can be used to present your side of the case to the Judge.

Your Testimony

You should describe for the Judge the reasons why you want the order of protection or why the protection order should not be granted. You should include information about any incidents in question. Remember to describe each incident by referring to "who, how, when and where".

Testimony of Witnesses

You may ask people who have knowledge about the incidents in question or corroborative evidence to testify at the full order hearing. Any testimony should be related and relevant to the reasons for the protection order request. You should present written statements of witnesses using the Declaration Form included with the petition packet. However, keep in mind that live testimony may be more helpful to the Judge than a written statement.

Physical Evidence

You may present physical items in order to prove your side of the case. If you bring digital evidence, you must either have it printed out on paper or on a CD/ DVD/Flashdrive that can be admitted and kept by the Court as part of the record. If you plan to present digital evidence, you should bring a way to play that evidence to the Court (such as a laptop) or the Judge will not be able to see it. Some examples of items that you might present include: Police reports, medical records, photographs, bills/invoices, letters, emails, voicemail messages, and video. You bear the burden of presenting your side of the case. The Judge and clerks are not allowed to do that work for you.

Copies

You must have three copies of anything you plan to show to the Judge (1) for yourself; (2) for the other party; and (3) a copy for the Judge/court file. Providing this evidence in advance of the hearing to the Court and the other party will prevent delays. You may drop off a copy of any evidence to the clerk in advance of your hearing and the clerk will contact the other party regarding pick up, if the clerk has contact information for that party. If you fail to bring adequate copies, the clerk will charge you for any copies requested at 50 cents per page.

Instructions for Petition for an Extreme Risk Protection Order – Respondent Under 18 Years

An Extreme Risk Protection Order is designed to prevent individuals who are at high risk of harming themselves or others from accessing firearms by allowing family, household members, and police to obtain a court order when there is demonstrated evidence that the person poses a significant danger, including danger as a result of threatening or violent behavior.

This type of order doesn't provide protections to the petitioner. It cannot order restraints against the respondent such as "do not harm," "stay away from," and "do not contact" the petitioner.

The court can order that the respondent surrender firearms and any concealed pistol licenses, and that respondent not possess or purchase firearms.

If the respondent is at least 18 years old, use the form "Petition for Extreme Risk Protection Order."

This form is used to start the case. This form will be:

- Filed as a public court record and will start a civil court case.
- Served (personal delivery) to the person against whom you are seeking the order.

The information in the petition is used by the court to determine if:

- You are authorized to file this type of petition.
- The court has authority to enter an order on your behalf.
- The respondent's behavior meets the legal requirements for the court to grant the order.

This form is used to request both an immediate temporary order and a full order:

- If you have facts to support your fears and the court finds an emergency exists, the court may immediately issue a temporary order that will last until the court holds a hearing, usually within 14 days.
 - The clerk shall forward a copy of the petition and the temporary order to law enforcement who will serve the respondent.
- There is no fee.
 - You must provide an address for the respondent.
 - You must provide an address for the respondent's parent or guardian; or
 - You must provide an address for the Department of Children, Youth, and Families if the respondent is subject to a dependency or court ordered out-of-home placement.
 - The law enforcement officer completing service on the respondent must file an affidavit, declaration, or certificate of service with the court or the hearing cannot go forward.

- You must attend the hearing. At the hearing, the court will determine if it should issue a full order. The respondent has a right to attend that hearing and defend against your allegations.

Please Print Clearly Using Black or Blue Ink!

Top of the form (Page 1)

Fill in your name (first, middle initial, last) as the “Petitioner.” The person against whom you are filing is the “Respondent.” Fill in the respondent's name (first, middle initial, last).

General Information: Who is Filing this Case/Respondent’s Age (Section 1)

The court must know who is filing this case.

- If you are a family or household member, check the 1.A box and also check the box identifying your relationship with the respondent.
- If you are a police officer or you’re filing on behalf of a law enforcement agency, check the 1.B box and identify the agency. Also check the appropriate box about notice you’ve provided, or will attempt to provide, to the respondent’s family or household member or any known third parties who may be at risk.

The court may appoint a Guardian ad Litem for the Respondent. The court must know the Respondent’s age. Check the box that applies.

- If the respondent is 16 or 17 years of age, appointment of a guardian ad litem is not required. However, the court may still appoint one in certain circumstances.
- If the respondent is 15 years of age or younger and is not an emancipated minor, a guardian ad litem must be appointed to represent him or her in this action under RCW 4.08.050.
- The court will not order the petitioner to pay guardian ad litem fees.

Residency (Section 2)

Check the applicable box/es.

Firearms (Section 3)

The court needs to know the type and location of any firearms the respondent currently owns, possesses, has custody of, has access to, or controls. In section 3, check the type of firearm, list the number of each type, where the firearms are kept, and the date, time, and place you last saw them. You can use the *Firearm Identification Worksheet*, form XR 102, to help identify types of firearms. You may attach the *Firearm Identification Worksheet* to your petition.

On the top of page 2, in section 3, check the boxes that apply and write in the facts that explain the boxes you checked.

Court Cases Involving You (Section 4)

This may not be the first court proceeding involving you and the respondent. The court will need to know about other cases, such as divorce, parentage, or criminal, or other restraining orders, protection orders, or no-contact orders.

If there are other cases or court orders involving you and the respondent, list the case name (the parties' names), the case number (if you know it), the court (district, municipal, or superior) and the county, type of case, name of any protected person, and any times the respondent violated the order.

Court Cases Involving Others (Section 5)

The court must know about any other court cases between the respondent and any other person. To the best of your knowledge, list any criminal or civil lawsuits; protection, restraining, or no-contact orders.

Request for Emergency Order (Section 6)

You may fear that, **in the near future**, the respondent poses a **significant danger** of causing personal injury to others or to him or herself, through the use of firearms. You can ask the court to restrict the respondent's right to firearms on a temporary basis, until the court hearing. Check the box and describe the facts that support your fears.

Statement (Section 7, Page 3)

First read through the statement section in the petition before you start writing. There are several places for you to provide facts about the respondent's behavior and describe your reasons for filing this case.

Convictions or Arrests (Section 8)

The court will consider the respondent's criminal history involving felonies, domestic violence, hate crime offenses, and violent crimes. If you have knowledge that the respondent has been arrested or convicted of such crimes, check the appropriate box/es and describe.

Violence and Threats (Section 9)

The court will consider the behavior that causes you to fear the respondent poses a significant danger of causing personal injury to others, or to him or herself. Check each box that applies and describe exactly what happened. Include details such as dates, locations, statements, and injuries. You may attach additional pages if you need more room.

Respondent's Behavior (Section 10)

The court will consider any behaviors that present an imminent threat of harm to self or others. Describe anything the respondent has said or done that causes you to fear such harm.

Evidence of Alcohol or Substance Abuse (Section 11)

Describe evidence of respondent's abuse of alcohol, or legal or illegal drugs, including driving under the influence of alcohol or drugs.

Other (Section 12)

If you have additional information to help the court make a decision, describe it here. If you have additional documents such as records or reports, you may attach them to the petition.

Address for You to Receive Legal Documents (Section 13)

The respondent has a right to have you served with legal documents in response to this petition or to notify you of hearings. Check the box to indicate where you agree to accept service. Write in the complete physical address.

- List your residential address. If disclosure of your residential address will put your safety or the safety of your family or household at risk, you are entitled to keep it confidential. You must list an alternate address where you agree to accept legal documents.
- If you are filing on behalf of a law enforcement agency, list the agency's physical address.

Sign the Form

When you are done completing the petition, you will swear to the truthfulness of your statement. Put today's date in the date line and fill in the city where you are completing this form.

Sign the form. Print your name below your signature. If you are a law enforcement officer, include your badge/personnel number. If you are an attorney, include your Washington State Bar Association number.

Law Enforcement Information – Extreme Risk Protection Order (LEIS)

You must complete a Law Enforcement Information – Extreme Risk Protection Order (LEIS), form XR 105. This form is confidential, and it does not go in the public court file and is not served on the respondent.

- It is used by Law Enforcement to locate and identify the respondent when serving documents.
- It is also used by Law Enforcement when entering the order in the state-wide database.

Complete as much information as possible, especially first name, middle initial, last name, and date of birth.

If the respondent has a disability, brain injury, or other impairment, you may know of special assistance that law enforcement could provide when serving the documents. For example:

“Respondent has a brain injury. If respondent is rushed, respondent may freeze up and may not respond quickly, or may become verbally aggressive. Remind respondent to contact a friend.”

“Respondent has epilepsy and diabetes and may have seizures when stressed. Respondent doesn't respond well to being rushed and will need time to get meds and supplies.”

BAINBRIDGE ISLAND MUNICIPAL COURT Kitsap County, Washington	Mailing Addr: PO Box 151, Rollingbay, WA 98061 Location Addr: 10255 NE Valley Rd, Bainbridge Island, WA Phone # 206-842-5641 Fax # 206-842-0316 www.bainbridgewa.gov/court Email: court@bainbridgewa.gov
<hr/> Petitioner vs. <hr/> Respondent	No. _____ Petition for an Extreme Risk Protection Order – Respondent Under 18 years (PTXR18)

Information about appointment of a guardian ad litem for respondent:

- If the respondent is 16 or 17 years of age, appointment of a guardian ad litem is not required. However, the court may still appoint one in certain circumstances.
- If the respondent is 15 years of age or younger and is not an emancipated minor, a guardian ad litem must be appointed to represent him or her in this action under RCW 4.08.050.
- The court will not order the petitioner to pay guardian ad litem fees.

General Information	
1.A <input type="checkbox"/> I am a family or household member of the respondent. My relationship with the respondent is (check all that apply):	
<input type="checkbox"/> Spouse or former spouse	<input type="checkbox"/> Blood relation other than parent or child
<input type="checkbox"/> Parent of a child in common	<input type="checkbox"/> Current or former legal guardian
<input type="checkbox"/> Current or former domestic partner	<input type="checkbox"/> Stepparent or stepchild
<input type="checkbox"/> Current or former cohabitant within the past year	<input type="checkbox"/> Parent or child
<input type="checkbox"/> Current or former dating relationship	<input type="checkbox"/> In-law
1.B <input type="checkbox"/> I am filing on behalf of _____ law enforcement agency.	
<input type="checkbox"/> I have already notified the respondent’s family or household members and any known 3rd parties who may be at risk of violence; OR	
<input type="checkbox"/> My agency will make a good faith effort to provide notice to them by <input type="checkbox"/> telephone <input type="checkbox"/> email <input type="checkbox"/> in-person <input type="checkbox"/> other _____ within a reasonable period of time.	
1.C Respondent is <input type="checkbox"/> 16 or 17 years of age <input type="checkbox"/> 15 or under <input type="checkbox"/> Under 18, but I do not know the exact age.	

2. I reside in this county.
 I am filing on behalf of a law enforcement agency that is located in this county.
 The respondent resides in this county.

3. Describe below any firearms the respondent currently owns, possesses, has custody of, has access to, or controls.

Type of firearm	How many firearms?	Where is the firearm kept?	Date/time/place you last saw the firearm
<input type="checkbox"/> Handgun			
<input type="checkbox"/> Shotgun / Rifle			
<input type="checkbox"/> Semi-Automatic Assault Rifle			

Check all the boxes that apply and describe below:
 Respondent has access to someone else's firearm.
 Respondent expressed an intent to obtain a firearm.
 Respondent has unlawfully or recklessly used, displayed, or brandished a firearm.
 Respondent recently acquired a firearm.

Describe:

4. Between the respondent and me: List any criminal or civil protection, restraining or no-contact orders, pending lawsuits, or other legal action. *If you have more than three matters, list details on additional sheet.*

	Case #1	Case #2	Case #3
Case Name			
Case Number			
Court/County/State			
Type of Case			
Protected Person			
Was there any order violation?			

5. Between the respondent and any other person: List any criminal or civil protection, restraining or no-contact orders. *If you have more than three matters, list details on additional sheet.*

	Case #1	Case #2	Case #3
Protected Person			
Case Number			
Court/County/ State			
Was there any order violation?			

6. Request for an Extreme Risk Protection Order – Respondent Under 18 Years

[] I want a temporary extreme risk protection order effective immediately, without prior notice to respondent, that lasts up to 14 days, or until the court hearing:

These are the specific facts known to me that cause me to believe the respondent poses a **significant danger in the near future** of causing personal injury to self or others by having custody or control, purchasing, possessing, accessing, or receiving firearms. More detailed information is provided in the Statement in section 7.

After a hearing, where the respondent has a right to be present, I want the court to issue an Extreme Risk Protection Order that lasts for one year:

After the hearing, I want the court to issue an Extreme Risk Protection Order that lasts for one year because the respondent poses a significant danger of causing personal injury to self or others by having custody or control, purchasing, possessing, accessing, or receiving a firearm.

My statement below includes the respondent’s specific words, actions, or other facts that cause me to have a reasonable fear of **future** dangerous acts by respondent.

7. Statement

To enter an Extreme Risk Protection Order, the court must find it more likely than not that the respondent poses a significant danger of causing personal injury to self or others by having custody or control, purchasing, possessing, accessing, or receiving a firearm.

Complete all of the following sections that apply. Attach additional pages, as needed.

8. Convictions or Arrests. Check all the boxes that apply and describe below:

Respondent has been arrested or convicted of a:

- domestic violence crime.
- felony or violent crime.
- hate crime offense or malicious harassment (threats, physical injury, or property damage based on the victim’s race, color, religion, ancestry, national origin, gender, sexual orientation, gender expression or identity, or mental, physical, or sensory disability).

Describe: (Include location, court name, and case number, if known.)

9. Violence and Threats: Check each box that applies and explain below.

- Respondent has recently committed or threatened violence against self or others, whether or not respondent had a firearm.
- Respondent has shown, within the past 12 months, a pattern of acts or threats of violence, which can include violent acts against self or others.
- Respondent has a history of use, attempted use, or threatened use of physical force against another person.
- Respondent has a history of stalking another person.

Explain:

Date/When	Describe what happened.

10. Respondent's behavior	Describe any behaviors by the respondent that present an imminent threat of harm to self or others.

11. Corroborated evidence of respondent's alcohol or controlled substance abuse.	Describe any evidence and attach any documents corroborating (supporting) the respondent's abuse of alcohol, legal or illegal drugs.

12. Other important information that you think will help the court make a decision.	

13. You must provide an address where you can be served with legal documents. Chose ONE option and then write the address in the line below:	
	<input type="checkbox"/> I can be served with legal documents at the address below: OR
	<input type="checkbox"/> Disclosing my residential address would risk harm to me or a member of my family or household. I can be served with legal documents at the alternate address below: OR
	<input type="checkbox"/> I am filing on behalf of a law enforcement agency. Service can be made at the law enforcement agency address listed below:
	Address: _____

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Dated: _____ at _____, Washington.

Signature of Petitioner

Print Name and if Law Enforcement Badge No.

Case Name: _____

County: _____ Case No: _____

Firearm Identification Worksheet *(You may attach this to the petition.)*

Does your partner possess any guns? Yes No

If yes, where does your partner store the guns? _____

To the best of your knowledge, are the guns typically loaded?

Yes No I don't know

The pictures below are examples of the most common guns. If you recognize any of the pictures below as similar to the one/s your partner has, please circle it and write in the circle how many your partner has.

Handgun

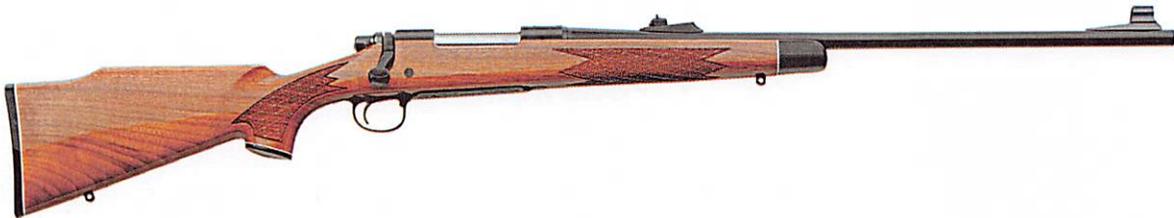




Assault Rifle



Rifle





Signed

Dated

Law Enforcement Information - Extreme Risk PO – Respondent Under 18 Years

Do NOT serve or show this sheet to the respondent!

Do NOT FILE in the court file. Give this form to law enforcement.

Type or print clearly! This completed form is **required** by law enforcement. This information is **necessary** to serve, enforce, and enter your order into the state-wide law enforcement computer. Fill in the following information as completely as possible.

Court Name: _____ County: _____	Case Number: _____
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Respondent’s Information (The person to be restrained from owning, possessing, accessing, or obtaining weapons.)

Name:				First		Middle		Last		Nickname		Relationship to Petitioner	
Date of Birth		Sex	Race	Height	Weight	Eye Color		Hair Color		Skin Tone		Build	
<input type="checkbox"/> Current or <input type="checkbox"/> Last Known Address Street: _____ City: _____ State: _____ Zip: _____								Phone(s) w/Area Code		Need Interpreter? Yes or No Language: _____			
Email address: _____													
Employer			Employer's Address						Work Hours: Phone: (____) _____				
Vehicle License Number		Vehicle Make and Model			Vehicle Color		Vehicle Year		Driver's License or ID number			State	

Does the restrained person have a disability, brain injury, or impairment requiring special assistance when law enforcement serves the order? No. Yes. If yes, describe (continue on back, if needed):

Hazard Information - Restrained Person’s History Includes:

Involuntary/Voluntary Commitment Suicide Attempt or Threats Threats of “Suicide by Cop”
 Assault Assault with Weapons Alcohol/Drug Abuse Other:

Weapons: Handguns Shotguns Rifles Semi-Automatic Assault Rifles Knives Explosives
 Other:

Location of Weapons: Vehicle On Person Residence Describe in detail:

Has the restrained person had advanced or military firearms training? No. Yes. If yes, describe (continue on separate sheet, if needed):

Current Status (Circle Yes, No)	Are you and the restrained person living together now? Y N Does the restrained person know you’re trying to get this order? Y N Is the restrained person likely to react violently when served? Y N
-------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Parent or Guardian of Minor Respondent

If the respondent is under 18 years old, a copy of the order must be served on the parent or guardian of the minor at any address where the minor resides, or the Department of Children, Youth, and Families in the case where the minor is the subject of a dependency or court approved out-of-home placement.

Minor Respondent currently lives with: (check all that apply)		
<input type="checkbox"/> Parent(s)	<input type="checkbox"/> Legal guardian	<input type="checkbox"/> Other (specify) _____
<input type="checkbox"/> Court approved dependency or out-of-home placement		

(Continued.)

Provide the information below for **at least one** parent or legal guardian of the respondent.

Parent or Guardian #1									
Name: First Middle Last			Nickname		Relationship to Respondent [] Parent [] Legal Guardian				
Date of Birth	[] Male [] Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build	
[] Current or [] Last Known Address Street: City: State: Zip:					Phone(s) w/Area Code		Need Interpreter? Yes or No Language:		
Email address:									
Employer		Employer's Address		Phone: ()		Work Hours:			
Vehicle License Number	Vehicle Make and Model		Vehicle Color	Vehicle Year	Driver's License or ID number			State	
<p>Does the parent or guardian have a disability, brain injury, or impairment requiring special assistance when law enforcement serves the order? [] No. [] Yes. If yes, describe (continue on back, if needed):</p> <p>Hazard Information – Parent or Guardian's History Includes: [] Involuntary/Voluntary Commitment [] Suicide Attempt or Threats [] Threats of "Suicide by Cop" [] Assault [] Assault with Weapons [] Alcohol/Drug Abuse [] Other: Weapons: [] Handguns [] Shotguns [] Rifles [] Semi-Automatic Assault Rifles [] Knives [] Explosives [] Other: Location of Weapons: [] Vehicle [] On Person [] Residence Describe in detail: Has the parent or guardian had advanced or military firearms training? [] No. [] Yes. If yes, describe (continue on separate sheet, if needed):</p>									
Current Status (Circle Yes or No below)									
Is the parent or guardian living with the restrained minor now? Y N					Does the parent or guardian know you're trying to get this order? Y N				
Are you and the parent or guardian living together now? Y N					Is the parent or guardian likely to react violently when served? Y N				

Parent or Guardian #2									
Name: First Middle Last			Nickname		Relationship to Respondent [] Parent [] Legal Guardian				
Date of Birth	[] Male [] Female	Race	Height	Weight	Eye Color	Hair Color	Skin Tone	Build	
[] Current or [] Last Known Address Street: City: State: Zip:					Phone(s) w/Area Code		Need Interpreter? Yes or No Language:		
Email address:									
Employer		Employer's Address		Phone: ()		Work Hours:			
Vehicle License Number	Vehicle Make and Model		Vehicle Color	Vehicle Year	Driver's License or ID number			State	

(Continued.)

Does the parent or guardian have a disability, brain injury, or impairment requiring special assistance when law enforcement serves the order? No. Yes. If yes, describe (continue on back, if needed):

Hazard Information – Parent or Guardian’s History Includes:

Involuntary/Voluntary Commitment Suicide Attempt or Threats Threats of “Suicide by Cop”

Assault Assault with Weapons Alcohol/Drug Abuse Other:

Weapons: Handguns Shotguns Rifles Semi-Automatic Assault Rifles Knives Explosives
 Other:

Location of Weapons: Vehicle On Person Residence

Describe in detail:

Has the parent or guardian had advanced or military firearms training? No. Yes. If yes, describe (continue on separate sheet, if needed):

Current Status (Circle Yes or No below)

Is the parent or guardian living with the restrained minor now? **Y N**

Does the parent or guardian know you’re trying to get this order? **Y N**

Are you and the parent or guardian living together now? **Y N**

Is the parent or guardian likely to react violently when served? **Y N**

Custody of DCYF:

The respondent is subject to a dependency in out-of-home placement

Fill in as much information as you can below:

Which court has jurisdiction?

Court case number:

Social worker or DCYF Representative Name:

Office location

Street:

City:

State:

Zip:

Phone

Office:

Mobile:

Email

Petitioner’s Information

(This is the person, officer, or law enforcement agency that filed the case. They are not protected.)

Name: First Middle Last

Agency Name, if petitioner is a law enforcement officer or agency:

Address: (If petitioner is a law enforcement officer, list your agency address.)

Phone(s) w/area code

Email address:

If your information ***is confidential***, you must provide the name, address, and phone number of someone willing to be your “contact.”

If petitioner is represented by an attorney, enter attorney’s name, WSBA #, address, and phone number.

Need an interpreter? **Yes or No** Language:

IF YOU WOULD LIKE TO PRESENT
STATEMENTS FROM WITNESSES, USE
THE ATTACHED DECLARATION FORM.

MAKE COPIES IF YOU NEED
STATEMENTS FROM MORE THAN ONE
WITNESS.

