**OREGON LEDS INFORMATION   
– CONFIDENTIAL -**

**DV-260**

**IMORTANT NOTICE:** **This form MUST NOT become part of the court file.** **The information in it is confidential.** If the court issues a restraining order, this form will provide law enforcement with the information needed to enforcement to enforce it.

Date form is filed:

**Person to be protected**: Fill out this form as much as you can and give it to the court clerk. The clerk will provide the confidential information to Umatilla Tribal Police on this form to attempt to enter it through Oregon LEDS into the Oregon Protection Order System, a statewide database that lets police know about your order.

**CASE NUMBER:**

This is an amended form *(date)*:

**1. Name of Protected Person *(Petitioner):***

Sex: Male  Female Height: Weight: DOB: SS#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hair Color: Eye Color: Age: Race: ODL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tribe Member and Tribe:

Home Address: City: State: Zip:

Work Address: City: State: Zip:

Home Phone: Work Phone: Cell Phone: E-Mail:

Vehicle *(year, make, model, color):* License Number/ State:

**2. Name of Restrained Person *(Respondent):***

Sex: Male  Female Height: Weight: DOB:

Hair Color: Eye Color: Age: Race:

Tribe Member and Tribe:

Address: City: State: Zip:

Work Address: City: State: Zip:

Home Phone: Work Phone: Cell Phone: E-Mail:

**3. Name of Restrained Person *(Respondent)*** *(continued)****:***

Driver’s License and State*:* Social Security Number:

Describe any scars, marks, or tattoos:

Other Names Used by person:

Vehicle *(year, make, model, color):* License Number/ State:

**4. Guns or Firearms**

Describe any guns or firearms that you believe the restrained person owns or has access to (*include types and locations, if known*):

**5. Additional Protected Persons**

In addition to the person named in **1**, the following persons are protected by temporary orders (children or intimate partners):

Full Name Sex Race DOB Relationship to Person in **1**