

**FAMILY ABUSE PREVENTION ACT
INSTRUCTIONS FOR
RESPONDENT'S WAIVER OF PERSONAL SERVICE FORM (FORM L)**

The "Respondent's Waiver of Personal Service" form (Form L) is an optional form that allows you to make choices for proceedings that might occur after you receive a Family Abuse Prevention Act Restraining Order. For example, if you do not follow the court's order to stop intimidating, molesting, interfering with, or menacing the petitioner, or you do not leave the residence as ordered by the court, you could be arrested or you could be charged with contempt of court.

If you are later charged with contempt of court for violating (not following) the Restraining Order, you have a right to have notice of the charge personally "served" on you (actually delivered to you). If, however, you need to keep your residential address confidential and you are willing to waive personal service, you can choose a different method of service (service to a contact address, business address, or agent) by filling out the "Respondent's Waiver of Personal Service" form (Form L).

This is an optional form. Fill out this form only if you are willing to waive your right to personal service if you are subsequently charged with contempt AND you would like to maintain the confidentiality of your residential address.

Lines 6 through 10. The information at the top of the Restraining Order (Form B) is the same information you will need to fill in at lines 6 through 10 of the Respondent's Waiver of Personal Service form (Form L). Fill in the name of the county that appears on line 6 of the Restraining Order. Fill in the Petitioner's name on line 7 and your name on line 10 (you are the "Respondent"). Include the court case number at line 8 (the same number that appears on line 8 of the Restraining Order).

Lines 15 through 19. Mark the appropriate blank (mark one blank only) and fill in your contact mailing address, business address, or agent's address. You are responsible for making sure that all papers delivered to your contact address, business address, or agent's address are actually delivered to you.

Lines 20 through 24. Fill out lines 20 through 24 only if you completed this document without the assistance of an attorney.

Lines 21 and 22. If you selected and completed this form yourself without paid assistance and without assistance from an attorney, check the blank at line 21.

Line 23. If you paid or will pay money to another person who is not an attorney for assistance in preparing this form, check the blank at line 23 and write in that person's name.

Lines 25 and 26. Sign your name on line 25, write in the date, and then clearly print your name on the line below your signature.

Lines 27 through 29. If you sign and complete this form yourself, print or type your name, address, and telephone number, and check the blank next to "Respondent." You may use a contact address and contact telephone number if you need to keep your residence address and telephone number confidential. Please note that "address" means a residence, mailing, or contact address in the same state as your home (the place where you live). (If your attorney completes this form, your attorney will mark the "Attorney for Respondent" blank and will fill in his or her Oregon State Bar number, along with his or her name, address, and telephone number.)

Make one copy of this completed form. Give the original form to the court clerk for filing and keep one copy for your records.

