

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW  
FORM 12.980(w), PETITION BY AFFIDAVIT FOR ORDER TO SHOW  
CAUSE FOR A VIOLATION OF FINAL JUDGMENT OF INJUNCTION FOR  
PROTECTION AGAINST DOMESTIC, REPEAT, DATING, OR SEXUAL  
VIOLENCE, OR STALKING (05/13)**

**When should this form be used?**

You may use this form if you have a valid **Final Judgment of Injunction for Protection Against Domestic, Repeat, Dating, or Sexual Violence, or Stalking**, in force which has been violated. You should use this **affidavit** to state the essential facts which establish a violation of the Final Judgment of Injunction.

This form should be typed or printed in black ink. After completing this form, you should sign the form before a **notary public** or the **clerk of the circuit court**. You should then **file** the original with such clerk or judge as determined by the chief judge of your circuit to be the recipient of affidavits of violation, provide a copy to the state attorney of that circuit and keep a copy for your records.

IN THE CIRCUIT COURT OF THE TWELFTH JUDICIAL CIRCUIT,  
IN AND FOR MANATEE COUNTY, FLORIDA

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

\_\_\_\_\_,  
Petitioner,

and

\_\_\_\_\_,  
Respondent.

**PETITION BY AFFIDAVIT FOR ORDER TO SHOW CAUSE FOR A VIOLATION  
OF FINAL JUDGMENT OF INJUNCTION FOR PROTECTION AGAINST  
( ) DOMESTIC VIOLENCE ( ) REPEAT VIOLENCE  
( ) DATING VIOLENCE ( ) SEXUAL VIOLENCE ( ) STALKING**

I, {full legal name} \_\_\_\_\_, being sworn, certify that I have actual knowledge of the following facts as set forth and the following statements are true:

1. The Court previously issued a {Choose **one only**}
  - a. \_\_\_ Final Judgment of Injunction for Protection Against Domestic Violence
  - b. \_\_\_ Final Judgment of Injunction for Protection Against Repeat Violence
  - c. \_\_\_ Final Judgment of Injunction for Protection Against Dating Violence
  - d. \_\_\_ Final Judgment of Injunction for Protection Against Sexual Violence
  - e. \_\_\_ Final Judgment of Injunction for Protection Against Stalking

in this case on {date} \_\_\_\_\_.

2. The Final Judgment of Injunction for Protection was served on Respondent on {date} \_\_\_\_\_.

3. On {date} \_\_\_\_\_, at {place and address} \_\_\_\_\_

\_\_\_\_\_,  
the following event(s) took place: \_\_\_\_\_

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



WHEREFORE, I respectfully request that the Court issue an Order to Show Cause, requiring Respondent to appear before the Court to show cause why Respondent should not be held in contempt of court for failure to abide by the terms and conditions of the Final Judgment of Injunction for Protection.

**I understand that by filing this affidavit, I am asking the court to hold a hearing, that both Respondent and I will be notified of the hearing, and that I must appear at the hearing. In addition to my own testimony, I understand that I can bring other proof of the violation such as, for example, people who saw Respondent violate the order, pictures, medical records, police reports, or anything might help show the judge how Respondent violated the Final Judgment of Injunction for Protection.**

**I have read every statement made in this affidavit and each statement is true and correct. I understand that the statements made in this affidavit are being made under penalty of perjury, punishable as provided in Section 837.02, Florida Statutes and that the punishment for knowingly making a false statement includes fines and/or imprisonment.**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner

STATE OF FLORIDA  
COUNTY OF MANATEE

Sworn to or affirmed and signed before me on \_\_\_\_\_ by \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary or clerk.]

\_\_\_\_\_  
Type of identification produced \_\_\_\_\_

Copies to:      Office of the State Attorney  
                         Manatee County Sheriff

**VIOLATION OF INJUNCTION CASE INFORMATION**

**GENERAL INFORMATION**

PETITIONER \_\_\_\_\_ CASE NO: \_\_\_\_\_  
RESPONDENT \_\_\_\_\_ DATE OF INCIDENT \_\_\_\_\_

**PETITIONER INFORMATION** (omit confidential information)

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ APT# \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_ HM PHONE: \_\_\_\_\_  
WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_  
NAME OF EMPLOYMENT: \_\_\_\_\_  
ARE YOU PLANNING TO MOVE? \_\_\_\_\_ IF YES PROVIDE NEW ADDRESS IF POSSIBLE

**CHILDREN**

NAME \_\_\_\_\_ AGE \_\_\_\_\_  
NAME \_\_\_\_\_ AGE \_\_\_\_\_  
NAME \_\_\_\_\_ AGE \_\_\_\_\_

**AGENCY INVOLVED**

HRS Y() N() HOPE Y() N()  
OTHER \_\_\_\_\_  
VICTIM ADVOCATE \_\_\_\_\_

**EMERGENCY CONTACTS**

NAME: \_\_\_\_\_ NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_ CITY, STATE, ZIP \_\_\_\_\_  
PHONE: \_\_\_\_\_ PHONE: \_\_\_\_\_

**RESPONDENT INFORMATION**

NAME: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
ADDRESS \_\_\_\_\_ APT# \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_ HM/CELL PHONE \_\_\_\_\_  
NAME OF EMPLOYER: \_\_\_\_\_ WK# \_\_\_\_\_  
SS# \_\_\_\_\_  
PLACES FREQUENTED \_\_\_\_\_

**WITNESS / EXHIBIT LIST FOR INDIRECT CRIMINAL CONTEMPT**

Persons listed below have seen or heard the acts described in the attached petition.

**Witness No. 1**

Name: \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Substance of testimony: \_\_\_\_\_

\_\_\_\_\_

**Witness No. 2**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Substance of testimony: \_\_\_\_\_

\_\_\_\_\_

**Witness No. 3**

Name: \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Substance of testimony: \_\_\_\_\_

\_\_\_\_\_

**EXHIBIT LIST**

Physical evidence (documents, photographs, letters, recordings, etc.).

**Exhibit No. 1**

**Exhibit No. 2**

**Exhibit No. 3**