

VIOLATION OF COURT ORDER REPORT FORM

RPD Case No. _____
Date of Report _____

Check Appropriate Court Order:

- Restraining Order
- Custody/Visitation Order (information only)
- Copy of Court Order Attached (optional)

PLEASE TYPE OR WRITE LEGIBLY

Shasta County Superior Court File No: _____ Presiding Judge _____

REPORTING PARTY:

Name: _____ Date of Birth: _____

Address: _____
(City) (State) (Zip Code)

Signature: _____ Phone: _____

PERSON IN VIOLATION:

Name: _____ Date of Birth: _____ Phone No.: _____

Address: _____
(City) (State) (Zip Code)

CHILDREN INVOLVED: (If Applicable)

Name: _____ Date of Birth: _____

Address: _____
(City) (State) (Zip Code)

Date and Time of Violation: _____

Location of Violation (Address): _____

Approving Supervisor: _____ District Attorney: _____

Official Use Only						
C II _____	FBI _____	CDL _____	EYE _____	HAI _____	HGT _____	WGT _____
Status of Violation:	<input type="checkbox"/> Arrested	<input type="checkbox"/> O/R	<input type="checkbox"/> Released	<input type="checkbox"/> Not Contacted	<input type="checkbox"/> CLETS Entry	

