STATE OF NORTH CAROLINA	File No.	
County	In The General Court Of Justice District Court Division	
Name Of Petitioner/Employer	COMPLAINT FOR	
Address Of Petitioner/Employer	CIVIL NO-CONTACT ORDER	
	PURSUANT TO THE WORKPLACE	
VERSUS	VIOLENCE PREVENTION ACT	
Name And Address Of Respondent	MOTION FOR TEMPORARY	
	NO-CONTACT ORDER	
	G.S. 95-262	
<ul> <li>Stalking or Nonconsensual Sexual Conduct,". Additional sheets may be attached.</li> <li>1. The petitioner is an employer as defined by G.S. 95-260(2 a the petitioner is a person or entity that employs one b the petitioner is the State of North Carolina or one o</li> <li>2. The unlawful conduct occurred in this county.</li> <li>3. An employee of the petitioner has suffered unlawful conduc construed to be carried out, or to have been carried out, at specific dates and describe in detail what happened.)</li> </ul>	Protective Order," AOC-CV-303, or the "Complaint for No-Contact Order for AOC-CV-520. Check only the boxes below that apply and fill in blanks. ) in that: or more employees.	
	asion, followed, was in the presence of, or otherwise harassed as gal purpose and with the intent to place the employee in reasonable	
	g or by any other means, to physically injure the employee in a manner nable person to believe that the threat was likely to be carried out and reat would be carried out.	
<ul> <li>4. The employee that is the subject of the unlawful conduct w determine whether any safety concerns exist in relation to</li> </ul>	vas consulted prior to the filing of this Complaint and Motion in order to the employee's participation in the process.	
	Dver)	

Bec	aus	e Of The	se Acts Of Unlawful Conduct. The Petitio	ner Requests That The Court Grant The Following Relief:		
	(Cl	heck only b	oxes that apply.)			
		. A permanent no-contact order. (A permanent order cannot last longer than one year.)				
	2. A temporary no-contact order. (A temporary order cannot last longer than ten days.)					
	3.	loss, or c	The temporary order to be issued ex parte (without notice to the defendant) because the plaintiff will suffer immediate injury, loss, or damage before the defendant can be heard in that: <i>(explain)</i>			
	_					
	A	ND (If you ch	ecked Block 3 above check a. or b. below.)			
		a. Io	,	if any, to give notice to the defendant and give the following reasons <i>(explain)</i>		
		oc	ertify that there is good cause to grant the r cur if the respondent was given any prior no pr notice were given to defendant.)	emedy because the harm that the remedy is intended to prevent would likely otice of the request for relief in that: <i>(Give specific reasons why harm would occur if</i>		
	4.	🗌 a. To	directing the respondent: not visit, assault, molest, or otherwise inter prkplace, or otherwise interfere with the emp	fere with the employer or the employer's employee at the employer's		
		_	cease stalking the employer's employee at			
		🗌 с. Тс	cease harassment of the employer or the e	employer's employee at the employer's workplace.		
				the employer's property, or the employer's employee at the employer's		
			vrkplace.	cation, or electronic means the employer or the employer's employee at the		
			ployer's workplace.			
		🗌 f. Ot	her relief sought:			
	_					
		Other: (s)	this verified Complaint as an Affidavit for all	purposes requiring an Amdavit.		
	0.		Sechy)			
Date				Signature Of Person Filing Complaint		
			N	ERIFICATION		
pet	itione	<i>er)</i> in this a		position of (position with lotion; that the matters and things alleged in the Complaint and Motion are belief and as to those I believe them to be true and accurate.		
sw			MED AND SUBSCRIBED TO BEFORI			
Date			Signature	Signature Of Person Signing Complaint		
	•	ity CSC stant CSC	Clerk Of Superior Court     District Court Ju     Designated Magistrate	dge Name Of Person Filing Complaint (Type Or Print)		
	Notar	ry	Date My Commission Expires			
	S	SEAL	County Where Notarized			