

**Law Enforcement  
and Confidential  
Information–  
Restrained Person  
(LECIFR)**

**Clerk: Do not file in a public access file. In criminal cases, do not file. Give to law enforcement.**

**King County District Court**

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

<b>Law Enforcement: Do not serve or show a completed LECIF to the other party.</b>			
<b>Instructions</b> –The <b>Restrained Person</b> must complete this form. Type or print clearly! Fill out sections 1 and 2. File with the court clerk.			
<b>1. Restrained Person’s Info</b>			
<b>Name:</b> First Middle Last			Date of Birth
Nickname/Alias/AKA (“Also known as”)			Relationship to Protected Person
Sex	Race	Height	Weight
Eye Color	Hair Color	Skin Tone	Build
Phone/s with Area Code (voice):		Need Interpreter? [ ] No [ ] Yes Language:	
<b>2. Where can the Restrained Person be served? List all known contact information.</b>			
Last Known Address. <b>Street:</b>			
City:		State:	Zip:
Cell number (text):		Email:	
Social Media Account/s & User Name/s:			
Other:			
Employer	Employer’s Address		Employer’s Phone
Work Hours	Driver’s License or ID number		State

Vehicle Make and Model	Vehicle License Number	Vehicle Color	Vehicle Year
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**Privacy Notice:** Only court staff, law enforcement, and some state agencies may see this form. The other party and their lawyer may not see this form unless a court order allows it. State agencies may disclose the information in this form according to their own rules.

**Changes:** If any information changes, fill out another copy of this form and file it with the court clerk.

I declare under penalty of perjury under the laws of the State of Washington that the information on this form about me is true and correct.

Signed at (*City and State*): \_\_\_\_\_ Date: \_\_\_\_\_



\_\_\_\_\_

Sign here

\_\_\_\_\_

Print name here