

**SUPERIOR COURT OF CALIFORNIA  
COUNTY OF SAN DIEGO**

**ELDER AND DEPENDENT ADULT  
ABUSE PACKET**



**FORMS INCLUDED IN THIS PACKET**

Can a Restraining Order to Prevent Elder or Dependent Adult Abuse Help Me?	Judicial Council Form #EA-100-INFO
Request for Restraining Order to Prevent Elder or Dependent Adult Abuse	Judicial Council Form #EA-100
Declaration	Judicial Council Form #MC-030
Temporary Restraining Order	Judicial Council Form #EA-110
Notice of Court Hearing	Judicial Council Form #EA-109
Confidential Information for Law Enforcement	Judicial Council Form #CLETS-001
Order for Removal from Residence (Domestic Violence – Elder/Dependent Abuse)	SDSC Form #D-072
Civil Case Cover Sheet	Judicial Council Form #CM-010
Instructions for Requesting to Continue Hearing on Restraining Order	SDSC Form #CIV-385
How to Ask for a New Hearing Date	Judicial Council Form #EA-115-INFO
Request to Continue Court Hearing	Judicial Council Form #EA-115
Order on Request to Continue Hearing	Judicial Council Form #EA-116
Request for Sheriff to Serve Court Papers	Judicial Council Form #SER-001

These instructions cannot cover all of the questions that may arise in a particular case. If you do not know what to do to protect your rights, you should see a lawyer.

### What is a restraining order?

It is a court order that helps protect people from being abused.

### Can I get a restraining order?

If you are a person 65 years or older or a dependent adult, you can ask for a restraining order if you have been or are being:

- Physically abused
- Financially abused
- Mentally or emotionally abused
- Neglected
- Abandoned or abducted
- Isolated, *or*
- Deprived by a caregiver of goods or services you needed to avoid harm or suffering

### How will the order help me?

The court can order a person to:

- Not physically abuse, harass, hit, or threaten you
- Not contact or go near you, *and*
- Not have any firearms (guns), firearm parts, or ammunition. This includes firearm receivers and frames, and any item that may be used as or easily turned into a receiver or frame (see Penal Code section 16531).

For more information about the items a restrained person cannot have, please see <https://selfhelp.courts.ca.gov/restraining-orders/prohibited-items>.

You can also ask for protection for people who live with you and family members.

### Who can apply for an elder or dependent adult abuse restraining order?

In addition to the elder or dependent adult, the following persons may apply for a restraining order on behalf of the elder or dependent adult:

- A conservator or trustee of the elder or dependent adult
- An attorney-in-fact of an elder or dependent adult who acts within the authority of the power of attorney
- A person appointed as a guardian ad litem for the elder or dependent adult
- Any other person legally authorized to seek such relief.

### How much does it cost?

There is no fee for filing a request for a restraining order. You do not need to pay a fee for service of the order. A sheriff or marshal will serve the order for free. Or you may arrange for service by a registered process server or a private party and pay any fee that is charged. The court can make the person who loses the case pay all the court fees and the lawyer's fees for the other party.

### What forms do I need to get the order?

You must fill out all of form [EA-100, Request for Elder or Dependent Adult Abuse Restraining Orders](#), and form [CLETS-001, Confidential CLETS Information](#). If you need attachments, you may use form [MC-025, Attachment](#). You must also fill out items 1 and 2 on form [EA-109, Notice of Court Hearing](#), and items 1, 2, and 3 on form [EA-110, Temporary Restraining Order](#).

### Where can I get these forms?

You can get the forms from legal publishers or from the California Courts website at [www.courts.ca.gov/forms](http://www.courts.ca.gov/forms). You also may be able to find them at your local courthouse or county law library.

### What do I need to do to get the order?

You must go to the superior court in the county where the abuse took place or the person to be restrained lives. At the court, ask where you should file your request for a restraining order. (A self-help center or legal aid association may be able to assist you in filing your request.) At the court, give your forms to the clerk of the court. The clerk will give you a hearing date on the *Notice of Court Hearing* form, and if your request for immediate orders is granted, a copy of the *Temporary Restraining Order* signed by a judicial officer.

### How soon can I get the order?

If you ask for a temporary restraining order, the court will decide within 24 hours whether or not to make the order. Sometimes the court decides sooner. Ask whether you should wait or come back later to get the signed *Notice of Court Hearing and Temporary Restraining Order*.



**How long does the order last?**

If the court makes a temporary order, it will last until your hearing date. At that time, the court will decide to continue or cancel the order. The order could last for up to five years.

**How will the person to be restrained know about the order?**

Someone age 18 or older—**not you** or anyone else to be protected by the order—must “serve” (give) the person to be restrained a copy of the order. The server must then fill out form [EA-200, Proof of Personal Service](#), and give it to you to file with the court. For help with service, ask the court clerk for form [EA-200-INFO, What Is “Proof of Personal Service?”](#)

**What if the restrained person does not obey the order?**

Call the police. The restrained person can be arrested and charged with a crime.

**Do I have to go to court?**

Yes. Go to court on the date the clerk gives you.

**Do I need to bring a witness to the court hearing?**

Witnesses are not required, but it helps to have more proof of the abuse than just your word. You can bring:

- Witnesses
  - Written statements from witnesses made under oath
  - Photos
  - Medical or police reports
  - Damaged property
  - Threatening letters, emails, or telephone messages
- The court may or may not let witnesses speak at the hearing. So, if possible, you should bring their written statements under oath to the hearing. (You can use form [MC-030](#) for this.)

**Do I need a lawyer?**

Having a lawyer is always a good idea, but it is not required and you are not entitled to a free, court-appointed attorney. Ask the court clerk about free and low-cost legal services and self-help centers in your county.

**Will I see the restrained person at the court hearing?**

If the person comes to the hearing, yes. But that person does not have the right to speak to you. If you are afraid, tell the court officer.

**Can I bring someone with me to court?**

Yes. You can bring someone to sit with you during the hearing. But that person cannot speak for you in court. Only you or your lawyer (if you have one) can speak for you.

**What if I don't speak English?**

When you file your papers, ask the clerk if a court interpreter is available. You can also use form [INT-300, Request for Interpreter \(Civil\)](#) or a local court form or website to request an interpreter. For more information about court interpreters, go to <https://selfhelp.courts.ca.gov/request-interpreter>.

**EA-109 Notice of Court Hearing**

Clerk stamps date here when form is filed.

**1 Elder or Dependent Adult in Need of Protection**

a. Full Name: \_\_\_\_\_  
 Person requesting protection for the elder or dependent adult, if different (person named in item 3 of Form EA-100):  
 Full Name: \_\_\_\_\_  
 Lawyer for person named above (if any for this case):  
 Name: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

b. Firm Name: \_\_\_\_\_  
 Address for person named above (If you have a lawyer, give your lawyer's information. If you do not have a lawyer, give information for the person requesting the order. If you want to keep your home address private, you may give a different mailing address instead. You do not have to give telephone, fax, or e-mail.):  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

Fill in court name and street address:  
 Superior Court of California, County of \_\_\_\_\_  
 Court fills in case number when form is filed.  
 Case Number: \_\_\_\_\_

**2 Person You Want Protection From**  
 Full Name: \_\_\_\_\_  
The court will complete the rest of this form.

**3 Notice of Hearing**  
 A court hearing is scheduled on the request for restraining orders against the person in 2: \_\_\_\_\_  
 Name and address of court if different from above: \_\_\_\_\_  
 Hearing Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Dept.: \_\_\_\_\_ Room: \_\_\_\_\_

**4 Temporary Restraining Orders** (Any orders granted are on Form EA-110, served with this notice.)  
 a. Temporary Restraining Orders for personal conduct and stay-away orders as requested in Form EA-100, Request for Elder on Dependent Adult Abuse Restraining Orders are (check only one box below):  
 (1)  All GRANTED until the court hearing.  
 (2)  All DENIED until the court hearing. (Specify reasons for denial in b, below.)  
 (3)  Partly GRANTED and partly DENIED until the court hearing. (Specify reasons for denial in b, below.)

Judicial Council of California, www.courts.ca.gov  
 New January 1, 2012, Mandatory Form  
 Welfare and Institutions Code, § 16601.05  
 Approved by DOJ

**Notice of Court Hearing**  
 (Elder or Dependent Adult Abuse Prevention)

EA-109, Page 1 of 3



**What if the restrained person's abuse caused me to owe money or debts?**

If the restrained person's financial abuse caused you to have certain debts or bills (such as using your name to open a credit card and make purchases that you didn't agree to), you can ask the judge to make a special decision or finding that the restrained person caused you to have the debts or bills. This special finding may be helpful if you are sued for the debts or bills.

**Information about the process is also available online.**

See <https://selfhelp.courts.ca.gov/EA-restraining-order>.

**For help in your area, contact:**

*[Local information may be inserted.]*

**Can I agree with the restrained person to cancel the order?**

No. Once the order is issued, only the judge can change or cancel it. You or the restrained person would have to file a request with the court to cancel the order.

**What if I have a disability?**

If you have a disability and need an accommodation while you are at court, you can use form [MC-410, Disability Accommodation Request](#), to make your request. You can also ask the ADA Coordinator in your court for help. For more information, see form [MC-410-INFO, How to Request a Disability Accommodation for Court](#).

Clerk stamps date here when form is filed.

Read *Can a Restraining Order to Prevent Elder or Dependent Adult Abuse Help Me?* (form EA-100-INFO) before completing this form. Also fill out *Confidential CLETS Information* (form CLETS-001) with as much information as you know.

Fill in court name and street address:

**Superior Court of California, County of**

Court fills in case number when form is filed.

**Case Number:****1 Elder or Dependent Adult in Need of Protection**

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

Gender:  M  F  Nonbinary Age: \_\_\_\_\_**2 Person From Whom Protection Is Sought**

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

Address (if known): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**3 Person Requesting Order**

Who is asking the court for protection? (Check a, b, or c):

a.  The elder or dependent adult named in ①.

b.  Name: \_\_\_\_\_  
 conservator of the  person  estate  person and estate  
 of the person named in ①, appointed by (name of court): \_\_\_\_\_

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

c.  Other (name) \_\_\_\_\_

(Show this person's legal authority to make this request on an attached sheet of paper. Write "Attachment 3c—Information About Person Requesting Protective Order" for a title. You may use form MC-025, Attachment.)

**4 Contact Information**

Contact information for the person asking the court for protection

a. Your Lawyer (if you have one for this case)

Name: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

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

b. Your Address (If you have a lawyer, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, you may give a different mailing address instead. The person in ① does not have to give telephone, fax, or email.)

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

**This is not a Court Order.**

**5 Description of Protected Person**

The person named in ① (check a or b):

- a.  Is age 65 or older and a resident of California.
- b.  Is a resident of California and an adult under age 65. This person has physical or mental limitations that restrict his or her ability to carry out normal activities or to protect his or her rights. (Briefly describe limitations on the attached sheet of paper or form MC-025. Write "Attachment 5b—Description of Protected Person" for a title.)

**6 Additional Protected Persons**

a. Are you asking for protection for any other family or household members or for the conservator of the elder or dependent adult listed in ①?  Yes  No (If yes, list them):

<u>Full Name</u>	<u>Gender</u>	<u>Age</u>	<u>Relation to person in ①?</u>	<u>Lives with person in ①?</u>
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Check here if there are more persons. Attach a sheet of paper and write "Attachment 6a—Additional Protected Persons" for a title. You may use form MC-025, Attachment.

b. Why do these people need protection? (Explain below):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 6b—Why Others Need Protection" for a title.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**7 Relationship of Parties**

How does the person in ① know the person in ②? (Explain below):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 7—Relationship of Parties" for a title.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**This is not a Court Order.**



**8 Description of Abuse**

a. Abuse means either:

- (1) Physical abuse, neglect, financial abuse, abandonment, isolation, abduction, or other treatment with resulting physical harm or pain or mental suffering; or
- (2) The withholding by a caretaker of goods or services that are necessary to avoid physical harm or mental suffering.

b. Tell the court about the last time the person in (2) abused the person in (1).

(1) When did it happen? *(Provide date or estimated date)*: \_\_\_\_\_

(2) Who else was there?

(3) Describe what happened below.

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 8b(3)—Describe Abuse" for a title.

(4) Was the abuse **solely financial abuse** unaccompanied by force, threat, harassment, intimidation, or any other form of abuse?

Yes, only financial abuse.  No, the abuse included other forms of abuse described above.

(5) Did the person in (2) use or threaten to use a gun or any other weapon?

Yes  No *(If yes, explain below)*:

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 8b(5)—Use of Weapons" for a title.

(6) Was the person in (1) harmed or injured as a result of the acts of abuse described above?

Yes  No *(If yes, explain below)*:

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 8b(6)—Harm or Injury" for a title.

(7) Did the police come?  Yes  No

If yes, did they give the person in (1) or the person in (2) an Emergency Protective Order?  Yes  No

If yes, the order protects *(check all that apply)*:

the person in (1)  the person in (2)  the persons in (6).

*(Attach a copy of the order if you have one.)*

**This is not a Court Order.**





- 8 c. Is the person in 2 a care custodian who deprived the person in 1 of (kept from the person, did not allow the person to have or receive, or did not provide the person with) goods or services that the person needed to avoid physical harm or mental suffering?  Yes  No  
 (If yes, describe below what the person was deprived of and how that affected the person):  
 Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 8c—Deprivation by Care Custodian" for a title.

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- d. Has the person in 2 abused the person in 1 at other times?  
 Yes  No (If yes, describe prior incidents and provide dates below):  
 Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 8d—Previous Abuse" for a title.

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9 **Venue**

Why are you filing in this county? (Check all that apply):

- a.  The person in 2 lives in this county.  
 b.  The person in 1 was abused by the person in 2 in this county.  
 c.  Other (specify): \_\_\_\_\_

10 **Other Court Cases**

- a. Has the person in 1 or any of the persons named in 6 been involved in another court case with the person in 2?  No  Yes (If yes, specify the kind of each case and indicate where and when each was filed):

	Kind of Case	Filed in (County/State)	Year Filed	Case Number (if known)
(1)	<input type="checkbox"/> Elder or Dependent Adult Abuse	_____	_____	_____
(2)	<input type="checkbox"/> Civil Harassment	_____	_____	_____
(3)	<input type="checkbox"/> Domestic Violence	_____	_____	_____
(4)	<input type="checkbox"/> Divorce, Nullity, Legal Separation	_____	_____	_____
(5)	<input type="checkbox"/> Paternity, Parentage, Child Custody	_____	_____	_____
(6)	<input type="checkbox"/> Eviction	_____	_____	_____
(7)	<input type="checkbox"/> Guardianship	_____	_____	_____
(8)	<input type="checkbox"/> Workplace Violence	_____	_____	_____
(9)	<input type="checkbox"/> Small Claims	_____	_____	_____
(10)	<input type="checkbox"/> Criminal	_____	_____	_____
(11)	<input type="checkbox"/> Other (specify): _____	_____	_____	_____

- b. Are there now any protective or restraining orders in effect relating to the person in 1 or any of the persons named in 6 and the person in 2?  No  Yes (If yes, attach a copy if you have one.)

**This is not a Court Order.**





**Check the orders you want.**

**11  Personal Conduct Orders**

I ask the court to order the person in **2** **not** to do any of the following things to the person in **1** or to any person to be protected listed in **6**:

- a.  Physically abuse, financially abuse, intimidate, molest, attack, strike, stalk, threaten, assault (sexually or otherwise), hit, harass, destroy the personal property of, or disturb the peace of the person.
- b.  Contact the person, either directly or indirectly, in **any** way, including, but not limited to, in person, by telephone, in writing, by public or private mail, by interoffice mail, by email, by text message, by fax, or by other electronic means.
- c.  Other (*specify*):
  - Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 11c—Other Personal Conduct Orders" for a title.

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*The person in **2** will be ordered not to take any action to get the addresses or locations of any protected person unless the court finds good cause not to make the order.*

**12  Stay-Away Orders**

a. I ask the court to order the person in **2** to stay at least \_\_\_\_\_ yards away from (*check all that apply*):

- (1)  The elder or dependent adult in **1**.
- (2)  The persons in **6**.
- (3)  The home of the elder or dependent adult.
- (4)  The job or workplace of the elder or dependent adult.
- (5)  The vehicle of the elder or dependent adult.
- (6)  Other (*specify*): \_\_\_\_\_

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b. If the court orders the person in **2** to stay away from all the places listed above, will he or she still be able to get to his or her home, school, or job?  Yes  No (*If no, explain below*):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 12b—Stay-Away Orders" for a title.

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**This is not a Court Order.**



**13**  **Move-Out Order**

I ask the court to order the person in **2** to move out from and not return to the residence at (address):

The person in **1** will suffer physical or emotional harm if the person in **2** does not leave the residence. The person in **2** is not named in the title or lease of the residence, either alone or with others beside the person in **1**.

I ask for this move-out order right away to last until the hearing, because:

- a. The person in **2** assaulted or threatened the person in **1** ; and
- b. The person in **1** has the right to live at the above residence. (Explain below):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 13b—My Right to Residence" for a title.

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**14**  **Order for Counseling or Anger Management Courses**

**i** This item is only available in instances of alleged physical abuse or deprivation of care, not in cases with only alleged financial abuse.

- a. I request the person in item **2** be ordered by the court to attend clinical counseling or anger management courses provided by a professional (a counselor, psychologist, psychiatrist, therapist, clinical social worker, or mental or behavioral health professional licensed in the State of California to provide counseling or anger management courses).

- b. Explain why you are requesting an order that the person in item **2** attend clinical counseling or anger management courses.

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 14b— Counseling or Anger Management" for a title.

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**15** **Firearms (Guns), Firearm Parts, and Ammunition**

Does the person in **2** own or possess any firearms (guns), firearm parts, or ammunition? This includes firearm receivers and frames, and any item that may be used as or easily turned into a receiver or frame (see Penal Code section 16531).  Yes  No  I don't know

*Unless the abuse is only financial, if the judge grants a protective order, the person in **2** will be prohibited from owning, possessing, purchasing, receiving, or attempting to purchase or receive firearms (guns), firearm parts, and ammunition while the protective order is in effect. The person in **2** will also be ordered to turn in to law enforcement, or sell to or store with a gun dealer, any firearms (guns) and firearm parts within their immediate possession or control.*

**This is not a Court Order.**



**16**  **Temporary Restraining Order**

I request that a Temporary Restraining Order (TRO) be issued against the person in (2) to last until the hearing. I am presenting form EA-110, *Temporary Restraining Order*, for the court’s signature together with this *Request*.

Has the person in (2) been told that you were going to go to court to seek a TRO against them?

- Yes  No (If you answered no, explain why below):
- Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write “Attachment 16—Temporary Restraining Order” for a title.

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

**17**  **Request to Give Less Than Five Days' Notice of Hearing**

You must have your papers personally served on the person in (2) at least five days before the hearing, unless the court orders a shorter time for service. (Read form EA-200-INFO, What Is “Proof of Personal Service”?, to learn about serving legal papers. Form EA-200, Proof of Personal Service, may be used to show the court that the papers have been served.)

If you want there to be less than five days between service and the hearing, explain why:

- Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write “Attachment 17—Request to Give Less Than Five Days’ Notice” for a title.

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

**18**  **Debts Caused by Financial Abuse**

You can ask the judge to decide at the hearing that certain debts or bills you have were caused by the person in (2)’s financial abuse. This may help you defend against the debt if you are sued in another case.

- a. If you want the judge to make this special finding, list the debts or bills you have that were caused by the person in (2)’s financial abuse.

Check here if you want to list additional debts or bills that were caused by financial abuse. You can attach form MC-025 and write “Attachment 18a—Additional Debts” for a title.

	<u>Money Owed To</u>	<u>For</u>	<u>Amount</u>
(1)	_____	_____	\$ _____
(2)	_____	_____	\$ _____
(3)	_____	_____	\$ _____

- b. Describe what the person in (2) did to cause the debts and bills that you listed above. Provide as much detail as you can about the person in (2)’s financial abuse.

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write “Attachment 18b—How Debt Was Incurred” for a title.

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

**This is not a Court Order.**



**19**  **Lawyer's Fees and Costs**

I ask the court to order payment of my  lawyer's fees  court costs.

The amounts requested are:

<u>Item</u>	<u>Amount</u>	<u>Item</u>	<u>Amount</u>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Check here if there are more items. Put the items and amounts on the attached sheet of paper or form MC-025 and write "Attachment 19—Lawyer's Fees and Costs" for a title.

**20**  **Possession and Protection of Animals**

I ask the court to order the following:

- a.  That the person in **1** be given the sole possession, care, and control of the animals listed below, which they own, possess, lease, keep, or hold, or which reside in their household.  
*(Identify animals by, e.g., type, breed, name, color, sex.)*

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

I request sole possession of the animals because *(specify good cause for granting order):*

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 20a—Possession of Animals" for a title.

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

- b.  That the person in **2** must stay at least \_\_\_\_\_ yards away from, and not take, sell, transfer, encumber, conceal, molest, attack, strike, threaten, harm, or otherwise dispose of, the animals listed above.

**21** **No Fee to Serve Orders** *If you want the sheriff or marshal to serve (notify) the person in **2** about the orders for free, ask the court clerk what you need to do.*

**This is not a Court Order.**



**22**  **Additional Orders Requested**

I ask the court to make the following additional orders (*specify*):

*Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 22—Additional Orders Requested" for a title.*

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**23** Number of pages attached to this form, if any: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
*Lawyer's name (if any)*

▶ \_\_\_\_\_  
*Lawyer's signature*

I declare under penalty of perjury under the laws of the State of California that the information above and on all attachments is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Type or print your name*

▶ \_\_\_\_\_  
*Signature of person making this request*

**This is not a Court Order.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):    TELEPHONE NO.: _____ FAX NO. (Optional): _____ EMAIL ADDRESS: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY           CASE NUMBER: _____
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO</b> <input type="checkbox"/> HALL OF JUSTICE, 330 W BROADWAY, SAN DIEGO, CA 92101 <input type="checkbox"/> CENTRAL DIVISION, KEARNY MESA, 8950 CLAIREMONT MESA BLVD., SAN DIEGO, CA 92123 <input type="checkbox"/> EAST COUNTY DIVISION, 250 E. MAIN, EL CAJON, CA 92020 <input type="checkbox"/> NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 <input type="checkbox"/> SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
<b>DECLARATION</b>	

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF DECLARANT)

- Attorney for     Plaintiff     Petitioner     Defendant  
 Respondent     Other (Specify):

Clerk stamps date here when form is filed.

Person in ① must complete items ①, ② and ③ only.

**① Protected Elder or Dependent Adult**

a. Full Name: \_\_\_\_\_

Person requesting protection for the elder or dependent adult, if different (*person named in item ③ of form EA-100*):

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

Lawyer for person named above (*if any, for this case*):

Name: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

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

b. Your Address (*If you have a lawyer, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, you may give a different mailing address instead. You do not have to give telephone, fax, or email.*):

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Fill in court name and street address:

**Superior Court of California, County of**

Court fills in case number when form is filed.

**Case Number:**

**② Restrained Person**

*(Give all the information you know. Information with a star (\*) is required to add this order to the California police database. If age is unknown, give an estimate.)*

*Full Name: _____	*Age: _____	Date of Birth: _____
*Race: _____	Height: _____	Weight: _____
*Gender: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Nonbinary		Home Address: _____
City: _____	State: _____	Zip: _____
Relationship to Protected Person: _____		

**③  Additional Protected Persons**

In addition to the elder or dependent adult named in ①, the following family or household members or conservator of that person are protected by the temporary orders indicated below:

Full Name	Gender	Age	Household Member?	Relation to Protected Person
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Check here if there are additional protected persons. List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use form MC-025, Attachment.

**④ Expiration Date**

*This Order expires at the end of the hearing scheduled for the date and time below:*

Date: \_\_\_\_\_ Time: \_\_\_\_\_  a.m.  p.m.

**This is a Court Order.**





**To the Person in ② :**

The court has issued the temporary orders checked as granted below. If you do not obey these orders, you can be arrested and charged with a crime. You may have to go to jail for up to one year, pay a fine of up to \$1,000, or both.

**⑤ Personal Conduct Orders**

Not Requested     Denied Until the Hearing     Granted as Follows:

a. You must **not** do the following things to the elder or dependent adult named in ①

and to the other protected persons listed in ③:

- (1)  Physically abuse, financially abuse, intimidate, molest, attack, strike, stalk, threaten, assault (sexually or otherwise), hit, harass, destroy personal property of, or disturb the peace of the person.
- (2)  Contact the person, either directly or indirectly, in **any** way, including, but not limited to, in person, by telephone, in writing, by public or private mail, by interoffice mail, by email, by text messages, by fax, or by other electronic means.
- (3)  Take any action to obtain the person's address or location. If this item ③ is not checked, the court has found good cause not to make this order.
- (4)  Other (*specify*):  
 Other personal conduct orders are attached at the end of this Order on Attachment 5a(4).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b. Peaceful written contact through a lawyer or a process server or other person for service of legal papers related to a court case is allowed and does not violate this order. However, you may have your papers served by mail on the person in ①.

**⑥ Stay-Away Orders**

Not Requested     Denied Until the Hearing     Granted as Follows:

a. You **must** stay at least \_\_\_\_\_ yards away from (*check all that apply*):

- (1)  The elder or dependent adult in ①                      (5)  The vehicle of the person in ①
- (2)  Each person in ③    (6)  Other (*specify*):  
\_\_\_\_\_
- (3)  The home of the elder or dependent adult  
\_\_\_\_\_
- (4)  The job or workplace of the elder or dependent adult  
\_\_\_\_\_

b. This stay-away order does not prevent you from going to or from your home or place of employment.

**⑦ Move-Out Order**

Not Requested     Denied Until the Hearing     Granted as Follows:

You must immediately move out from and not return to (*address*):

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

**This is a Court Order.**



**8 No Firearms (Guns), Firearm Parts, or Ammunition**

**Not Issued (financial abuse only)**                       **Granted as Follows:**

**This order must be granted unless only financial abuse is alleged.**

- a. You cannot own, possess, have, buy or try to buy, receive or try to receive, or in any other way get any prohibited items listed in b below.
- b. **Prohibited items are:**
  - (1) Firearms (guns);
  - (2) Firearm parts, meaning receivers, frames, or any item that may be used as or easily turned into a receiver or frame (see Penal Code section 16531); and
  - (3) Ammunition.
- c. You must:
  - (1) Sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any firearms (guns) and firearm parts in your immediate possession or control. This must be done within 24 hours of being served with this Order.
  - (2) File a receipt with the court within 48 hours of receiving this Order that proves that your firearms (guns) and firearm parts have been turned in, sold, or stored. (You may use form EA-800, *Receipt for Firearms and Firearm Parts*, for the receipt.)
- d.  The court has received information that you own or possess a firearm (gun), firearm parts, or ammunition.

**9 Financial Abuse**

This case  does **not**  does involve **solely financial abuse** unaccompanied by force, threat, harassment, intimidation, or any other form of abuse.

**10 Possession and Protection of Animals**

**Not Requested**     **Denied Until the Hearing**     **Granted as Follows (specify):**

- a.  The person in **(1)** is given the sole possession, care, and control of the animals listed below, which are owned, possessed, leased, kept, or held by him or her, or reside in his or her household.  
*(Identify animals by, e.g., type, breed, name, color, sex.)*

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- b.  The person in **(2)** must stay at least \_\_\_\_\_ yards away from, and not take, sell, transfer, encumber, conceal, molest, attack, strike, threaten, harm, or otherwise dispose of, the animals listed above.

**This is a Court Order.**



11 Other Orders

- Not Requested Denied Until the Hearing Granted as Follows (specify):

Four horizontal lines for specifying details.

Additional orders are attached at the end of this Order on Attachment 11.

To the Person in 1:

12 Mandatory Entry of Order Into CARPOS Through CLETS

This Order must be entered into the California Restraining and Protective Order System (CARPOS) through the California Law Enforcement Telecommunications System (CLETS). (Check one):

- a. The clerk will enter this Order and its proof of service form into CARPOS.
b. The clerk will transmit this Order and its proof of service form to a law enforcement agency to be entered into CARPOS.
c. By the close of business on the date that this Order is made, the petitioner or the petitioner's lawyer should deliver a copy of the Order and its proof of service form to the law enforcement agencies listed below to enter into CARPOS:

Name of Law Enforcement Agency

Address (City, State, Zip)

Two horizontal lines for agency and address information.

Additional law enforcement agencies are listed at the end of this Order on Attachment 12.

13 No Fee to Serve (Notify) Restrained Person

If the sheriff or marshal serves this Order, he or she will do it for free.

14 Number of pages attached to this Order, if any:

Date:

Judicial Officer

This is a Court Order.



## Warnings and Notices to the Restrained Person in 2

### You Cannot Have Firearms (Guns), Firearm Parts, or Ammunition

If the court grants the orders in item ⑧, you cannot own, have, possess, buy or try to buy, receive or try to receive, or otherwise get any prohibited items listed in item 8b on page 3 while this Order is in effect. If you do, you can go to jail and pay a \$1,000 fine. You must sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any firearms (guns) and firearm parts that you have or control as stated in item ⑧. The court will require you to prove that you did so.

### Notice Regarding Nonappearance at Hearing and Service of Order

If you have been personally served with this Temporary Restraining Order and form EA-109, *Notice of Court Hearing*, but you do not appear at the hearing either in person or by a lawyer, and a restraining order that does not differ from this order except for the expiration date is issued at the hearing, a copy of the order will be served on you by mail at the address in item ②.

If this address is not correct or you wish to verify that the temporary restraining order was converted into a restraining order at the hearing without substantive change, or to find out the duration of the order, contact the clerk of the court.

### After You Have Been Served With a Restraining Order

- Obey all the orders.
- Read form EA-120-INFO, *How Can I Respond to a Request for Elder or Dependent Adult Abuse Restraining Orders?*, to learn how to respond to this Order.
- If you want to respond, fill out form EA-120, *Response to Request for Elder or Dependent Adult Abuse Restraining Orders*, and file it with the court clerk. You do not have to pay any fee to file your response.
- You must have form EA-120 served on the person in ① (the person asking the court for protection of the elder or dependent adult or the elder or dependent adult if no other person is named in that item), or that person's attorney, by mail. You cannot do this yourself. The person who does the mailing should complete and sign form EA-250, *Proof of Service of Response by Mail*. File the completed proof of service with the court clerk before the hearing date or bring it with you to the hearing.
- In addition to the response, you may file and have declarations served signed by you and other persons who have personal knowledge of the facts. You may use form MC-030, *Declaration*, for this purpose. It is available from the clerk's office at the court shown on page 1 of this form or at [www.courts.ca.gov/forms](http://www.courts.ca.gov/forms). If you do not know how to prepare a declaration, you should see a lawyer.
- Whether or not you file a response, you should attend the hearing. If you have any witnesses, they must also go to the hearing.
- At the hearing, the judge can make restraining orders against you that last for up to five years. Tell the judge why you disagree with the orders requested.

## Instructions for Law Enforcement

### Enforcing the Restraining Order

This order is enforceable by any law enforcement agency that has received the order, is shown a copy of the order, or has verified its existence on the California Restraining and Protective Order System (CARPOS). If the law enforcement agency has not received proof of service on the restrained person, the agency must advise the restrained person of the terms of the order and then must enforce it. Violations of this order are subject to criminal penalties.

**This is a Court Order.**

**Start Date and End Date of Orders**

This order *starts* on the date next to the judge’s signature on page 4. The order *ends* on the expiration date in item ④ on page 1.

**Arrest Required if Order Is Violated**

If an officer has probable cause to believe that the restrained person had notice of the order and has disobeyed the order, the officer must arrest the restrained person. (Pen. Code, §§ 836(c)(1), 13701(b).) A violation of the order may be a violation of Penal Code section 166 or 273.6. Agencies are encouraged to enter violation messages into CARPOS.

**Notice/Proof of Service**

The law enforcement agency must first determine if the restrained person had notice of the order. Consider the restrained person “served” (given notice) if (Pen. Code, § 836(c)(2)):

- The officer sees a copy of the proof of service or confirms that the proof of service is on file; or
- The restrained person was informed of the order by an officer.

An officer can obtain information about the contents of the order and proof of service in CARPOS. If proof of service on the restrained person cannot be verified, the agency must advise the restrained person of the terms of the order and then enforce it.

**If the Protected Person Contacts the Restrained Person**

Even if the protected person invites or consents to contact with the restrained person, this order remains in effect and must be enforced. The protected person cannot be arrested for inviting or consenting to contact with the restrained person. The order can be changed only by another court order. (Pen. Code, § 13710(b).)

**Conflicting Orders—Priorities for Enforcement**

**If more than one restraining order has been issued protecting the protected person from the restrained person, the orders must be enforced in the following priority** (see Pen. Code, § 136.2 and Fam. Code, §§ 6383(h)(2), 6405(b)):

1. *Emergency Protective Order (EPO)*: If one of the orders is an *Emergency Protective Order* (form EPO-001), provisions (e.g., stay-away order) that are more restrictive than in the other restraining/protective orders must be enforced. Provisions of another order that do not conflict with the EPO must be enforced.
2. *No-Contact Order*: If a restraining/protective order includes a no-contact order, the no-contact order must be enforced. Item 5a(2) is an example of a no-contact order.
3. *Criminal Protective Order (CPO)*: If none of the orders include an EPO or a no-contact order, the most recent CPO must be enforced. (Fam. Code, §§ 6383(h)(2) and 6405(b).) Additionally, a CPO issued in a criminal case involving charges of domestic violence, Penal Code sections 261, 261.5, or former 262, or charges requiring sex offender registration must be enforced over any civil court order. (Pen. Code, § 136.2(e)(2).) All provisions in the civil court order that do not conflict with the CPO must be enforced.
4. *Civil Restraining Orders*: If there is more than one civil restraining order (e.g., domestic violence, juvenile, elder abuse, civil harassment), then the order that was issued last must be enforced. Provisions that do not conflict with the most recent civil restraining order must be enforced.

*(Clerk will fill out this part.)*

**—Clerk's Certificate—**

*Clerk’s Certificate*  
[seal]

I certify that this *Temporary Restraining Order* is a true and correct copy of the original on file in the court.

Date: \_\_\_\_\_ Clerk, by \_\_\_\_\_, Deputy

**This is a Court Order.**

Clerk stamps date here when form is filed.

**1 Elder or Dependent Adult in Need of Protection**

a. Full Name: \_\_\_\_\_

Person requesting protection for the elder or dependent adult, if different (person named in item 3 of form EA-100):

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

Lawyer for person named above (if any for this case):

Name: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

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

b. Address for person named above (If you have a lawyer, give your lawyer's information. If you do not have a lawyer, give information for the person requesting the order. If you want to keep your home address private, you may give a different mailing address instead. You do not have to give telephone, fax, or email.):

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Fill in court name and street address:

**Superior Court of California, County of**

Court fills in case number when form is filed.

**Case Number:**

**2 Person You Want Protection From**

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

*The court will complete the rest of this form.*

**3 Notice of Hearing**

**A court hearing is scheduled on the request for restraining orders against the person in 2:**

<b>Hearing Date</b>	→ Date: _____	Time: _____	Name and address of court if different from above: _____ _____ _____
	Dept.: _____	Room: _____	
	_____		

**4 Temporary Restraining Orders** (Any orders granted are on form EA-110, served with this notice.)

a. Temporary Restraining Orders for personal conduct and stay-away orders as requested in form EA-100, Request for Elder on Dependent Adult Abuse Restraining Orders are (check only one box below):

- (1)  All **GRANTED** until the court hearing.
- (2)  All **DENIED** until the court hearing. (Specify reasons for denial in b, below.)
- (3)  Partly **GRANTED** and partly **DENIED** until the court hearing. (Specify reasons for denial in b, below.)



**4 Temporary Restraining Orders (Continued)**

b. Reasons for denial of some or all of those personal conduct and stay-away orders as requested in form EA-100, *Request for Elder or Dependent Adult Abuse Restraining Orders*, are:

(1)  The facts as stated in form EA-100 do not sufficiently show reasonable proof of a past act or acts of abuse of the elder or dependent adult by the person in (2).

(2)  Other (specify):  As stated on Attachment 4b.

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

**5 Service of Documents by the Person in (1)**

At least  five  \_\_\_\_\_ days before the hearing, someone age 18 or older—not you or anyone to be protected—must personally give (serve) a court file-stamped copy of this form EA-109, *Notice of Court Hearing*, to the person in (2) along with a copy of all the forms indicated below:

- a. EA-100, *Request for Elder or Dependent Adult Abuse Restraining Orders* (file-stamped)
- b.  EA-110, *Temporary Restraining Order* (file-stamped) **IF GRANTED**
- c. EA-120, *Response to Request for Elder or Dependent Adult Abuse Restraining Orders* (blank form)
- d. EA-250, *Proof of Service of Response by Mail* (blank form)
- e. EA-120-INFO, *How Can I Respond to a Request for Elder or Dependent Adult Abuse Restraining Orders?*
- f.  Other (specify): \_\_\_\_\_

Date: \_\_\_\_\_



\_\_\_\_\_  
*Judicial Officer*

**To the Person in (1) :**

- The court cannot make the restraining orders after the court hearing unless the person in (2) has been personally given (served) a copy of your request and any temporary orders. To show that the person in (2) has been served, the person who served the forms must fill out a proof of service form. Form EA-200, *Proof of Personal Service*, may be used.
- For information about service, read form EA-200-INFO, *What Is “Proof of Personal Service”?*
- If you are unable to serve the person in (2) in time, you may ask for more time to serve the documents. Use form EA-115, *Request to Continue Court Hearing and to Reissue Temporary Restraining Order*.





**To the Person in ② :**

- If you want to respond to the request for orders in writing, file form EA-120, *Response to Request for Elder or Dependent Adult Abuse Restraining Orders*, and have someone age 18 or older—**not you or anyone to be protected**—mail it to the person in ① .
- The person who mailed the form must fill out a proof of service form. Form EA-250, *Proof of Service of Response by Mail*, may be used. File the completed form with the court before the hearing and bring a copy with you to the court hearing.
- Whether or not you respond in writing, go to the hearing if you want the judge to hear from you before making an order. You may tell the judge why you agree or disagree with the orders requested.
- You may bring witnesses and other evidence.
- **At the hearing, the judge may make restraining orders against you that could last up to five years and may order you to sell or turn in any firearms (guns) and firearm parts that you own or possess. This includes firearm receivers and frames, and any item that may be used as or easily turned into a receiver or frame (see Penal Code section 16531).**



**Request for Accommodations**

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the hearing. Contact the clerk’s office or go to [www.courts.ca.gov/forms](http://www.courts.ca.gov/forms) for *Disability Accommodation Request* (form MC-410). (Civ. Code, § 54.8.)

*(Clerk will fill out this part.)*

**—Clerk's Certificate—**

I certify that this *Notice of Court Hearing* is a true and correct copy of the original on file in the court.

*Clerk's Certificate*  
[seal]

Date: \_\_\_\_\_

Clerk, by \_\_\_\_\_, Deputy

# CLETS-001 Confidential Information for Law Enforcement

**Instructions:** If you are asking for a restraining order, you must complete this form and give it to the court clerk, along with the other court forms required in your case. If the judge grants the restraining order, information you give on this form will be entered into a database (called CLETS) to help law enforcement enforce the order. If information changes later, you may complete this form again and turn it in to the court.

**To Court Clerk: Do not file this form. The information on this form must be entered into the protective order registry in CLETS.**

Court fills in case number when form is received.

Case Number: \_\_\_\_\_

Information that has a star (\*) next to it is required. All other information is helpful.

Date received by court: \_\_\_\_\_

## 1 Person You Want a Restraining Order Against

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

Other names used: \_\_\_\_\_

Marks, scars, or tattoos: \_\_\_\_\_ SSN: \_\_\_\_\_

Telephone: \_\_\_\_\_ Driver's license (number and state): \_\_\_\_\_

Vehicle type: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Plate number: \_\_\_\_\_

Name of employer and address: \_\_\_\_\_

Does the person speak English?  Yes  I don't know  No (list language): \_\_\_\_\_

Does the person have any firearms (guns), firearm parts, or ammunition?

No  I don't know

Yes (Give any information you have below, like the type, amount, or location of the firearm, if known.)

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

## 2 \*Your Name: \_\_\_\_\_

(Skip 3 and 4 if you are asking for a gun violence restraining order (form GV-100).)

## 3 Your information

\*Age: \_\_\_\_\_ Date of Birth (month, day, year): \_\_\_\_\_ \*Gender:  M  F  X (nonbinary)

Race: \_\_\_\_\_ Telephone: \_\_\_\_\_

Do you speak English?  Yes  No (list language): \_\_\_\_\_

## 4 Other People You Want Protected

\*Name: \_\_\_\_\_ \*Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\*Name: \_\_\_\_\_ \*Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\*Name: \_\_\_\_\_ \*Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\*Name: \_\_\_\_\_ \*Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Check here if you have more people to list. Write them on a separate piece of paper and write "Item 3" at the top and attach it to this form.

**This is not a Court Order—Do not place in court file.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  TELEPHONE NO.: _____ FAX NO. (Optional): _____ EMAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO</b> <input type="checkbox"/> CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 <input type="checkbox"/> CENTRAL DIVISION, HALL OF JUSTICE, 330 W. BROADWAY, SAN DIEGO, CA 92101 <input type="checkbox"/> EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020 <input type="checkbox"/> NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081 <input type="checkbox"/> SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910	
PETITIONER(S)	
RESPONDENT(S)	JUDGE/DEPT
<b>ORDER FOR REMOVAL FROM RESIDENCE (DOMESTIC VIOLENCE – ELDER/DEPENDENT ABUSE)</b>	CASE NUMBER

TO: **SAN DIEGO COUNTY SHERIFF**

Pursuant to the following TRO/RO issued on \_\_\_\_\_:

- Temporary Restraining Order (CLETS-TRO) (Domestic Violence Prevention) (JC Form #DV-110)
- Temporary Restraining Order (CLETS-TEA or TEF) (Elder or Dependent Adult Abuse Prevention) (JC Form #EA-110)
- Restraining Order After Hearing (CLETS-OAH) (Order of Protection) (Domestic Violence Prevention) (JC Form #DV-130)
- Elder or Dependent Adult Abuse Restraining Order After Hearing (CLETS-EAR or EAF) (Elder or Dependent Adult Abuse Prevention) (JC Form #EA-130)

**YOU ARE ORDERED** to remove (name of party to be removed): \_\_\_\_\_

from the residence located at: \_\_\_\_\_

Street

California

City

State

Zip Code

**YOU ARE FURTHER ORDERED** to remain on the premises of said residence for a reasonable period in order to provide an opportunity for the removed party to take personal effects from those premises.

Date: \_\_\_\_\_

\_\_\_\_\_  
Judge/Commissioner of the Superior Court

**CLERK'S CERTIFICATE**



The foregoing document, consisting of \_\_\_\_\_ page(s), is a full, true, and correct copy of the  original  copy on file in this office.

Clerk of the Superior Court

Date: \_\_\_\_\_

by \_\_\_\_\_, Deputy

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name, State Bar number, and address</i> ):  TELEPHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____ ATTORNEY FOR ( <i>Name</i> ): _____	<b>FOR COURT USE ONLY</b>
--	---------------------------

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO**

CENTRAL DIVISION, HALL OF JUSTICE, 330 W. BROADWAY, SAN DIEGO, CA 92101

CENTRAL DIVISION, JUVENILE COURT, 2851 MEADOW LARK DR., SAN DIEGO, CA 92123

EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020

NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081

SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910

CASE NAME: \_\_\_\_\_

<b>CIVIL CASE COVER SHEET</b> <input type="checkbox"/> <b>Unlimited</b> (Amount demanded exceeds \$35,000)	<input type="checkbox"/> <b>Limited</b> (Amount demanded is \$35,000 or less)	<b>Complex Case Designation</b> <input type="checkbox"/> Counter <input type="checkbox"/> Joinder Filed with first appearance by defendant (Cal. Rules of Court, rule 3.402)
--	--	---

CASE NUMBER: \_\_\_\_\_

JUDGE: \_\_\_\_\_

DEPT.: \_\_\_\_\_

*Items 1–6 below must be completed (see instructions on page 2).*

1. Check **one** box below for the case type that best describes this case:

<b>Auto Tort</b> <input type="checkbox"/> Auto (22) <input type="checkbox"/> Uninsured motorist (46) <b>Other PI/PD/WD (Personal Injury/Property Damage/Wrongful Death) Tort</b> <input type="checkbox"/> Asbestos (04) <input type="checkbox"/> Product liability (24) <input type="checkbox"/> Medical malpractice (45) <input type="checkbox"/> Other PI/PD/WD (23) <b>Non-PI/PD/WD (Other) Tort</b> <input type="checkbox"/> Business tort/unfair business practice (07) <input type="checkbox"/> Civil rights (08) <input type="checkbox"/> Defamation (13) <input type="checkbox"/> Fraud (16) <input type="checkbox"/> Intellectual property (19) <input type="checkbox"/> Professional negligence (25) <input type="checkbox"/> Other non-PI/PD/WD tort (35) <b>Employment</b> <input type="checkbox"/> Wrongful termination (36) <input type="checkbox"/> Other employment (15)	<b>Contract</b> <input type="checkbox"/> Breach of contract/warranty (06) <input type="checkbox"/> Rule 3.740 collections (09) <input type="checkbox"/> Other collections (09) <input type="checkbox"/> Insurance coverage (18) <input type="checkbox"/> Other contract (37) <b>Real Property</b> <input type="checkbox"/> Eminent domain/Inverse condemnation (14) <input type="checkbox"/> Wrongful eviction (33) <input type="checkbox"/> Other real property (26) <b>Unlawful Detainer</b> <input type="checkbox"/> Commercial (31) <input type="checkbox"/> Residential (32) <input type="checkbox"/> Drugs (38) <b>Judicial Review</b> <input type="checkbox"/> Asset forfeiture (05) <input type="checkbox"/> Petition re: arbitration award (11) <input type="checkbox"/> Writ of mandate (02) <input type="checkbox"/> Other judicial review (39)	<b>Provisionally Complex Civil Litigation (Cal. Rules of Court, rules 3.400–3.403)</b> <input type="checkbox"/> Antitrust/Trade regulation (03) <input type="checkbox"/> Construction defect (10) <input type="checkbox"/> Mass tort (40) <input type="checkbox"/> Securities litigation (28) <input type="checkbox"/> Environmental/Toxic tort (30) <input type="checkbox"/> Insurance coverage claims arising from the above listed provisionally complex case types (41) <b>Enforcement of Judgment</b> <input type="checkbox"/> Enforcement of judgment (20) <b>Miscellaneous Civil Complaint</b> <input type="checkbox"/> RICO (27) <input type="checkbox"/> Other complaint ( <i>not specified above</i> ) (42) <b>Miscellaneous Civil Petition</b> <input type="checkbox"/> Partnership and corporate governance (21) <input type="checkbox"/> Other petition ( <i>not specified above</i> ) (43)
--	--	--

2. This case  is  is not complex under rule 3.400 of the California Rules of Court. If the case is complex, mark the factors requiring exceptional judicial management:

a. <input type="checkbox"/> Large number of separately represented parties b. <input type="checkbox"/> Extensive motion practice raising difficult or novel issues that will be time-consuming to resolve c. <input type="checkbox"/> Substantial amount of documentary evidence	d. <input type="checkbox"/> Large number of witnesses e. <input type="checkbox"/> Coordination with related actions pending in one or more courts in other counties, states, or countries, or in a federal court f. <input type="checkbox"/> Substantial postjudgment judicial supervision
--	--

3. Remedies sought (*check all that apply*): a.  monetary b.  nonmonetary; declaratory or injunctive relief c.  punitive

4. Number of causes of action (*specify*): \_\_\_\_\_

5. This case  is  is not a class action suit.

6. If there are any known related cases, file and serve a notice of related case. (*You may use form CM-015.*)

Date: \_\_\_\_\_

_____ (TYPE OR PRINT NAME)	 _____ (SIGNATURE OF PARTY OR ATTORNEY FOR PARTY)
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**NOTICE**

- Plaintiff must file this cover sheet with the first paper filed in the action or proceeding (except small claims cases or cases filed under the Probate Code, Family Code, or Welfare and Institutions Code). (Cal. Rules of Court, rule 3.220.) Failure to file may result in sanctions.
- File this cover sheet in addition to any cover sheet required by local court rule.
- If this case is complex under rule 3.400 et seq. of the California Rules of Court, you must serve a copy of this cover sheet on all other parties to the action or proceeding.
- Unless this is a collections case under rule 3.740 or a complex case, this cover sheet will be used for statistical purposes only.

**Page 1 of 2**

**INSTRUCTIONS ON HOW TO COMPLETE THE COVER SHEET**

**CM-010**

**To Plaintiffs and Others Filing First Papers.** If you are filing a first paper (for example, a complaint) in a civil case, you **must** complete and file, along with your first paper, the Civil Case Cover Sheet contained on page 1. This information will be used to compile statistics about the types and numbers of cases filed. You must complete items 1 through 6 on the sheet. In item 1, you must check **one** box for the case type that best describes the case. If the case fits both a general and a more specific type of case listed in item 1, check the more specific one. If the case has multiple causes of action, check the box that best indicates the **primary** cause of action. To assist you in completing the sheet, examples of the cases that belong under each case type in item 1 are provided below. A cover sheet must be filed only with your initial paper. Failure to file a cover sheet with the first paper filed in a civil case may subject a party, its counsel, or both to sanctions under rules 2.30 and 3.220 of the California Rules of Court.

**To Parties in Rule 3.740 Collections Cases.** A "collections case" under rule 3.740 is defined as an action for recovery of money owed in a sum stated to be certain that is not more than \$25,000, exclusive of interest and attorney's fees, arising from a transaction in which property, services, or money was acquired on credit. A collections case does not include an action seeking the following: (1) tort damages, (2) punitive damages, (3) recovery of real property, (4) recovery of personal property, or (5) a prejudgment writ of attachment. The identification of a case as a rule 3.740 collections case on this form means that it will be exempt from the general time-for-service requirements and case management rules, unless a defendant files a responsive pleading. A rule 3.740 collections case will be subject to the requirements for service and obtaining a judgment in rule 3.740.

**To Parties in Complex Cases.** In complex cases only, parties must also use the Civil Case Cover Sheet to designate whether the case is complex. If a plaintiff believes the case is complex under rule 3.400 of the California Rules of Court, this must be indicated by completing the appropriate boxes in items 1 and 2. If a plaintiff designates a case as complex, the cover sheet must be served with the complaint on all parties to the action. A defendant may file and serve no later than the time of its first appearance a joinder in the plaintiff's designation, a counter-designation that the case is not complex, or, if the plaintiff has made no designation, a designation that the case is complex.

**CASE TYPES AND EXAMPLES**

**Auto Tort**

- Auto (22)–Personal Injury/Property Damage/Wrongful Death
- Uninsured Motorist (46) (*if the case involves an uninsured motorist claim subject to arbitration, check this item instead of Auto*)

**Other PI/PD/WD (Personal Injury/Property Damage/Wrongful Death) Tort**

- Asbestos (04)
- Asbestos Property Damage
- Asbestos Personal Injury/Wrongful Death
- Product Liability (*not asbestos or toxic/environmental*) (24)
- Medical Malpractice (45)
- Medical Malpractice–Physicians & Surgeons
- Other Professional Health Care Malpractice
- Other PI/PD/WD (23)
- Premises Liability (e.g., slip and fall)
- Intentional Bodily Injury/PD/WD (e.g., assault, vandalism)
- Intentional Infliction of Emotional Distress
- Negligent Infliction of Emotional Distress
- Other PI/PD/WD

**Non-PI/PD/WD (Other) Tort**

- Business Tort/Unfair Business Practice (07)
- Civil Rights (e.g., discrimination, false arrest) (*not civil harassment*) (08)
- Defamation (e.g., slander, libel) (13)
- Fraud (16)
- Intellectual Property (19)
- Professional Negligence (25)
- Legal Malpractice
- Other Professional Malpractice (*not medical or legal*)
- Other Non-PI/PD/WD Tort (35)

**Employment**

- Wrongful Termination (36)
- Other Employment (15)

**Contract**

- Breach of Contract/Warranty (06)
- Breach of Rental/Lease
- Contract (*not unlawful detainer or wrongful eviction*)
- Contract/Warranty Breach–Seller Plaintiff (*not fraud or negligence*)
- Negligent Breach of Contract/Warranty
- Other Breach of Contract/Warranty
- Collections (e.g., money owed, open book accounts) (09)
- Collection Case–Seller Plaintiff
- Other Promissory Note/Collections Case
- Insurance Coverage (*not provisionally complex*) (18)
- Auto Subrogation
- Other Coverage
- Other Contract (37)
- Contractual Fraud
- Other Contract Dispute

**Real Property**

- Eminent Domain/Inverse Condemnation (14)
- Wrongful Eviction (33)
- Other Real Property (e.g., quiet title) (26)
- Writ of Possession of Real Property
- Mortgage Foreclosure
- Quiet Title
- Other Real Property (*not eminent domain, landlord/tenant, or foreclosure*)

**Unlawful Detainer**

- Commercial (31)
- Residential (32)
- Drugs (38) (*if the case involves illegal drugs, check this item; otherwise, report as Commercial or Residential*)

**Judicial Review**

- Asset Forfeiture (05)
- Petition Re: Arbitration Award (11)
- Writ of Mandate (02)
- Writ–Administrative Mandamus
- Writ–Mandamus on Limited Court Case Matter
- Writ–Other Limited Court Case Review
- Other Judicial Review (39)
- Review of Health Officer Order
- Notice of Appeal–Labor Commissioner
- Appeals

**Provisionally Complex Civil Litigation (Cal. Rules of Court Rules 3.400–3.403)**

- Antitrust/Trade Regulation (03)
- Construction Defect (10)
- Claims Involving Mass Tort (40)
- Securities Litigation (28)
- Environmental/Toxic Tort (30)
- Insurance Coverage Claims (*arising from provisionally complex case type listed above*) (41)

**Enforcement of Judgment**

- Enforcement of Judgment (20)
- Abstract of Judgment (Out of County)
- Confession of Judgment (*non-domestic relations*)
- Sister State Judgment
- Administrative Agency Award (*not unpaid taxes*)
- Petition/Certification of Entry of Judgment on Unpaid Taxes
- Other Enforcement of Judgment Case

**Miscellaneous Civil Complaint**

- RICO (27)
- Other Complaint (*not specified above*) (42)
- Declaratory Relief Only
- Injunctive Relief Only (*non-harassment*)
- Mechanics Lien
- Other Commercial Complaint Case (*non-tort/non-complex*)
- Other Civil Complaint (*non-tort/non-complex*)

**Miscellaneous Civil Petition**

- Partnership and Corporate Governance (21)
- Other Petition (*not specified above*) (43)
- Civil Harassment
- Workplace Violence
- Elder/Dependent Adult Abuse
- Election Contest
- Petition for Name Change
- Petition for Relief From Late Claim
- Other Civil Petition



## SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO

### INSTRUCTIONS FOR REQUESTING TO CONTINUE HEARING ON RESTRAINING ORDER

Protected or restrained persons may request to continue the hearing on restraining order by following the process for the location where the hearing is scheduled as indicated below.

The following forms are required for all requests:

#### **Civil Harassment/Elder Abuse**

- **Request to Continue Hearing (JC Form #CH-115/EA-115)**
- **Order on Request to Continue Hearing (JC Form #CH-116/EA-116)**

Parties may request to continue the hearing by either appearing on the day of the hearing or appearing ex parte prior to the scheduled hearing date.

#### **Instructions for Appearing Ex Parte**

##### **Central Division**

An ex parte hearing may be scheduled by calling (619) 450-7275 and requesting to be transferred to Department 61. Notice of the ex parte hearing must be provided by a third party to the opposing party/attorney no later than 10:00 a.m. the court day prior to the ex parte appearance.

In addition to the required forms listed above, the requesting party must also complete and submit an Ex Parte Application (SDSC Form #ADM-252) to the courtroom clerk upon checking-in.

##### **East County Division**

An ex parte hearing may be heard on a walk-in basis. The required forms listed above must be submitted in the Business Office prior to 3:00 p.m.

##### **North County Division**

An ex parte hearing may be heard on a walk-in basis. The required forms listed above must be submitted in the Business Office prior to 3:00 p.m.

##### **South County Division**

An ex parte hearing may be scheduled at the counter in the Business Office or by calling (619) 746-6200 the day before the requested hearing date. Notice of the ex parte hearing must be provided by a third party to the opposing party/attorney no later than 10:00 a.m. the court day prior to the ex parte appearance.

In addition to the required forms listed above, the requesting party must also complete and submit an Ex Parte Application (SDSC Form #ADM-252) and a declaration of notice and drop them off in the Ex Parte Box no later than 12:00 p.m. the day before the scheduled ex parte hearing.

**1 You may need to ask for a new court date if:**

- You are the person seeking protection and are unable to have *Notice of Court Hearing* (form [EA-109](#)) and other papers served in time before your court date.
- You are the person to be restrained and making your first request to reschedule your court date.
- You have a good reason for needing a new court date. (The court may grant your request to reschedule on a showing of good cause.)

**2 What does form EA-115 do?**

Use *Request to Continue Hearing* (form [EA-115](#)) to ask the court to reschedule your court date. If your court date is rescheduled and a *Temporary Restraining Order* (TRO; form [EA-110](#)) was granted, the TRO will be extended until the end of your new court date unless the court decides to modify or terminate it. “Extend” means to keep any temporary orders in effect until the new hearing date.

**3 Follow these steps:**

- Fill out all of form [EA-115](#).
- Fill out items ① and ② on *Order on Request to Continue Hearing* (form [EA-116](#)).
- The judge will need to review your papers. In some courts, you must give your papers to the clerk. Ask the court clerk for information on how you ask the judge to review your papers.
- After you turn in your forms as required by your local court, check with the clerk’s office to see if the judge approved (granted) your request to reschedule your court date.
- If the judge signed form [EA-116](#), you will have a new court date. If the judge did NOT sign the form, you should go to court at the date, time, and location on form EA-109.
- Next, file both forms [EA-115](#) and [EA-116](#) with the clerk. The clerk will make up to three file-stamped copies for you. Keep at least one copy to bring to your court date.
- The other party must be served a copy of the court papers as described in item ⑥ on form [EA-116](#).
- Ask the person who serves the papers to complete a proof of service form and give it to you. If service was in person, use *Proof of Personal Service* (form [EA-200](#)). If service was by mail, use *Proof of Service—Civil* (form [POS-040](#)). Make two copies of the completed forms.
- File the completed and signed proof of service form with the clerk’s office before your court date.
- If the court reschedules your court date and extends the TRO to the new court date, the clerk will send the TRO to law enforcement. It will be entered into a statewide computer system that lets police know about the order so that it can be enforced.

**4 Go to your court date**

- Take at least two copies of your documents and filed forms to your court date. Include a filed proof of service form. “Documents” may include exhibits, declarations, and financial statements, and the court may enter into them evidence at its discretion.
- If you are the person seeking protection and you do not go to your court date, your TRO will expire on the date and time of your court date.
- If you are the person to be restrained and you do not go to the hearing, the court can still make orders against you that can last for up to five years.

**5 Need help?**

Ask the court clerk about free or low-cost legal help that may be available in your county.



Clerk stamps date here when form is filed.

**Instructions:** Use this form to ask the court to reschedule the court date listed on form [EA-109, Notice of Court Hearing](#). Read [EA-115-INFO, How to Ask for a New Hearing Date](#), for more information.

**1 Parties Information**

a. My name is: \_\_\_\_\_

b. I am the (*check one of the boxes below*):(1)  Protected party (*skip to* **2**).(2)  Person asking for protection for the protected party  
(*name of elder or dependent adult*): \_\_\_\_\_  
(*skip to* **2**).(3)  Restrained party (*give your contact information below*).

Address where I can receive mail:

This address will be used by the court and other party to notify you in this case. If you want to keep your home address private, you can use another address like a post office box or another person's address if you have their permission. If you have a lawyer, give your lawyer's address and contact information.

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

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

My contact information (*optional*):

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Lawyer's information (*skip if you do not have one*):

Name: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

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

Fill in court name and street address:

**Superior Court of California, County of**

Fill in case number:

**Case Number:****2 Information About My Case**a. The other party in this case is (*full name*): \_\_\_\_\_b. I have a court date currently scheduled for (*date*): \_\_\_\_\_**This is not a Court Order.**

**3 Is There a Temporary Restraining Order in Effect?**

- Yes. Date the order was made, if known: \_\_\_\_\_  
Please attach a copy of the order if you have one.
- No.
- I don't know.

**Notice:** If the court date is rescheduled, the *Temporary Restraining Order* ([form EA-110](#)) will remain in effect until the end of the new court date unless otherwise ordered by the court.

**4 Why Does the Court Date Need to be Rescheduled?**

- a.  I need more time to have the restrained party personally served.
- b.  I am the restrained party and this is my first request to reschedule the court date.
- c.  Other reason: \_\_\_\_\_

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

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
Type or print name of  
 Lawyer     Party Without Lawyer

\_\_\_\_\_  
Sign your name

**This is not a Court Order.**

Clerk stamps date here when form is filed.

Complete items ① and ② only.

① **Protected Party:** \_\_\_\_\_

② **Restrained Party:** \_\_\_\_\_

\_\_\_\_\_ **The court will complete the rest of the this form** \_\_\_\_\_

③ **Next Court Date**

a.  The request to reschedule the court date is **denied**.

Your court date is: \_\_\_\_\_

(1) Any *Temporary Restraining Order* (form [EA-110](#)) already granted stays in full force and effect until the next court date.

(2) Your court date is not rescheduled because: \_\_\_\_\_

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

b.  The request to reschedule the court date is **granted**. Your court date is rescheduled for the day and time listed below. See ④–⑧ for more information.

Name and address of court, if different from above:

**New Court Date** → Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Dept.: \_\_\_\_\_ Room: \_\_\_\_\_  
\_\_\_\_\_

Fill in court name and street address:

**Superior Court of California, County of**

Fill in case number:

**Case Number:**

④ **Temporary Restraining Order**

a.  **There is no *Temporary Restraining Order* (TRO) in this case until the next court date** because:

(1)  A TRO was not previously granted by the court.

(2)  The court terminates (cancels) the previously granted TRO because: \_\_\_\_\_

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

b.  **A *Temporary Restraining Order* (TRO) is still in full force and effect** because:

(1)  The court extends the TRO previously granted on (date): \_\_\_\_\_

It now expires on (date): \_\_\_\_\_

(If no date is listed, the TRO expires at the end of the court date listed in 3b.)

(2)  The court changes the TRO previously granted and signs a new TRO (form [EA-110](#)).

c.  Other (specify): \_\_\_\_\_

**Warning and Notice to the Restrained Party:**

If ④b is checked, an elder or dependent abuse restraining order has been issued against you. You must follow the orders until they expire.

**This is a Court Order.**



**5 Reason Court Date Is Rescheduled**

a.  There is good cause to reschedule the court date (*check one*):

(1)  The protected party has not served the restrained party.

(2)  Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

b.  This is the first time that the restrained party has asked for more time to prepare.

c.  The court reschedules the court date on its own motion.

**6 Serving (Giving) Order to Other Party**

The request to reschedule was made by the:

a.  **Protected party**

b.  **Restrained party**

c.  **Court**

(1)  You do not have to serve the restrained party because they or their lawyer were at the court date or agreed to reschedule the court date.

(2)  You must have the restrained party personally served with a copy of this order and a copy of all documents listed on form [EA-109](#), item **5**, by (date): \_\_\_\_\_

(3)  You must have the restrained party served with a copy of this order. This can be done by mail. You must serve by (date): \_\_\_\_\_

(4)  Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(1)  You do not have to serve the protected party because they or their lawyer were at the court date or agreed to reschedule the court date.

(2)  You must have the protected party personally served with a copy of this order by (date): \_\_\_\_\_

(3)  You must have the protected party served with a copy of this order. This can be done by mail. You must serve by (date): \_\_\_\_\_

(4)  Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(1)  Further notice is not required.

(2)  The court will mail a copy of this order to all parties by (date): \_\_\_\_\_

(3)  Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**This is a Court Order.**



**7 No Fee to Serve**

The sheriff or marshal will serve this order for **free**.  
Bring a copy of all the papers that need to be served to the sheriff or marshal.

**8  Other Orders**

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

Date: \_\_\_\_\_

\_\_\_\_\_  
Judicial Officer



**Request for Accommodations**

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the hearing. Contact the clerk's office or go to [www.courts.ca.gov/forms.htm](http://www.courts.ca.gov/forms.htm) for *Request for Accommodations by Persons With Disabilities and Response (form MC-410)*. (Civ. Code, § 54.8.)

**Instructions to Clerk**

If the hearing is rescheduled and the court extended, modified or terminated a temporary restraining order, then the court must enter this order into CLETS or send this order to law enforcement to enter into CLETS. This must be done within one business day from the day the order is made.

**—Clerk's Certificate—**

Clerk's Certificate  
[seal]

I certify that this *Order on Request to Continue Hearing (Temporary Restraining Order)* (CLETS-TEA or TEF) (form EA-116) is a true and correct copy of the original on file in the court.

Date: \_\_\_\_\_ Clerk, by: \_\_\_\_\_, Deputy

**This is a Court Order.**

**CONFIDENTIAL**

**Instructions:** Each county in California has a sheriff (and sometimes a marshal's office) that can serve different types of court papers, including restraining orders. Note that the sheriff cannot guarantee that they will be successful in finding the person you need served, but they will try to serve based on the information you put on this form.

- Complete this form for each set of papers you need served. You must complete a separate form for each person you need served.
- Find out where the person you need served is located. Give your papers to the sheriff or marshal's office in that county.
- You may have to pay for service of some court papers. For more information, see page 5 of this form, or go to <https://selfhelp.courts.ca.gov/sheriff-serves>.
- Do not use this form if you are asking the sheriff to enforce a wage garnishment order on an employer. Instead, use forms WG-001, *Application for Earnings Withholding Order*, and WG-035, *Confidential Statement of Judgment Debtor's Social Security Number*.
- If you want the sheriff to enforce a writ or levy, complete this form and form SER-001A, *Special Instructions for Writs and Levies—Attachment*.

**To Court Clerk: Do not file this form.**

**Sheriff File Number** (for sheriff to complete, if needed):

Fill in case number:

**Court Case Number:**

All information is required unless it is listed as optional or does not apply to your case.

① **To the Sheriff or Marshal of (name of county):** \_\_\_\_\_

② **Your Information**

a. Your name (party requesting service): \_\_\_\_\_

b. Your lawyer's information (if you have one)

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

Firm name: \_\_\_\_\_

c. Court case name: \_\_\_\_\_

(example: Garcia v. Smith)

d. Contact information for the sheriff or marshal to reach you

(Give an address where you can receive mail regularly, like a post office box, a Safe at Home address, or another safe address. If you have a lawyer, give the lawyer's information.)

Address to receive mail: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone number (optional): \_\_\_\_\_ Email address (optional): \_\_\_\_\_

**CONFIDENTIAL**

**This is not a court form. Do not file with the court.**

**3 Information About Person or Entity You Want Served**

*(Check a or b)*

a.  I ask the sheriff to serve a person *(complete section below)*

(1) Name of person: \_\_\_\_\_  
Nicknames or aliases *(optional)*: \_\_\_\_\_

(2) Telephone number *(optional)*: \_\_\_\_\_

(3) Can you describe the person?

No, I do *not* have any information about the person’s description.

Yes *(complete the section below with any information you have)*:

Gender:  Male  Female  Nonbinary

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair color: \_\_\_\_\_ Eye color: \_\_\_\_\_

Date of birth or age *(give estimate, if unknown)*: \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Special marks or features *(tattoos, scars, etc.)*: \_\_\_\_\_

Vehicle *(type, model, year, color, plate number)*: \_\_\_\_\_

*Check here if you are including a picture of the person.*

(4) Do you know of any safety or accessibility issues?

No

Yes *(complete the section below with any information you have)*:

The person *(check all that apply)*:

Has a gun or other weapon.

Is on probation or parole.

Has a history of violence or abuse.

Has an aggressive animal.

Has special training *(examples: military, first responder)*.

Has mental health issues.

Is deaf or hard of hearing.

Does not speak English *(list language)*: \_\_\_\_\_

Add any other information about safety or accessibility that you know about:

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

b.  I ask the sheriff to serve an entity *(examples: business or government agency)*

(1) Name and type of entity: \_\_\_\_\_  
Telephone number *(optional)*: \_\_\_\_\_

(2) If there is a specific person who should be served, give name: \_\_\_\_\_

(3) If there is an agent for service of process, give name: \_\_\_\_\_

(4) List any safety or accessibility issues *(examples: weapons, aggressive animals, language barrier)*:

\_\_\_\_\_

**CONFIDENTIAL**

**This is not a court form. Do not file with the court.**



**4 Address Where Person or Entity Should Be Served**

*(The sheriff typically serves during normal business hours. Check with the sheriff's office for the exact times.)*

Address: \_\_\_\_\_  Home  Business

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Gate code or special instructions: \_\_\_\_\_

Best time to serve at this address *(example: 8 a.m.–noon)*: \_\_\_\_\_

Check here if the person is in jail or prison *(give name of facility)*: \_\_\_\_\_

*Alternate address (optional)*

*(If the person cannot be found at the address listed above, some sheriffs may try a second address if it's in the same county. If you have a second address for the person you want served, complete the section below.)*

Address: \_\_\_\_\_  Home  Business

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Gate code or special instructions: \_\_\_\_\_

Best time to serve at this address *(example: 8 a.m.–noon)*: \_\_\_\_\_

**5 Information About Your Request**

a. What type of court papers are you giving the sheriff to serve *(examples: summons, restraining order, eviction, small claims, bank levy, or writ of attachment)*?

\_\_\_\_\_

b. List all forms or court papers you want served on the person in **3** a. *(optional)*.

*(Note: You can list each form by its form number (example: FL-100, SC-100). If there is no form number, give the title of the document. The court may have ordered you to serve certain papers. Look at the court's order and list all forms required. If you do not know which papers you need to serve, ask a lawyer, or contact your local self-help center for free information.)*

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

c. Is there a court hearing (court date)?

I don't know

No

Yes *(if yes, give date of hearing)*: \_\_\_\_\_

**CONFIDENTIAL**

**This is not a court form. Do not file with the court.**





5 d. Is there a deadline for service?  
 I don't know  
 No  
 Yes (if yes, give deadline): \_\_\_\_\_

e. Has the court allowed you to serve your court papers in another way besides personal service (example: substituted service)?  
 I don't know  
 No  
 Yes (if yes, include a copy of the order allowing another type of service)

f. Is there any other information you want or need to give to the sheriff to serve your court papers?  
 No  
 Yes (if yes, give information below):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6 Enforcement of Writ or Levy

If you want the sheriff to enforce a writ or levy, you must complete form SER-001A, Special Instructions for Writs and Levies—Attachment, and turn it in with this form.

(Only complete this section if you want the sheriff to enforce a writ or levy.)

Do you want the sheriff to both serve your court papers and act as levying officer?

- Yes
- No. I only want the sheriff to act as levying officer. A registered process server has or will serve my papers.

Your Signature (party asking for service, or their lawyer)

Date: \_\_\_\_\_

\_\_\_\_\_  
Type or print your name



\_\_\_\_\_  
Sign your name (may be electronic)

CONFIDENTIAL

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## Your Next Steps

- Find out if you need to pay a fee for service by asking the court's self-help center, a lawyer, or the sheriff's office. Here are some situations where you **do not** need to pay for service:
  - If you have a fee waiver in your case (fee waiver granted by a judge on form FW-003 or FW-005).
  - If you are serving a domestic violence, elder abuse, or gun violence restraining order.
  - If you have a civil harassment, workplace violence, or school violence restraining order based on a credible threat of violence or stalking.
- Give this form and a copy of all the court papers you need served to the sheriff or marshal, including a copy of a fee waiver (if you have one). If you do not have to pay a fee to the sheriff, you can send your papers electronically. If you have to pay a fee, contact the sheriff to find out your options for turning in your request. Note that you can always turn in your request in person.
- You should get a form back from the sheriff.
  - If the sheriff was able to serve your court papers, you should receive a form (called a proof of service). **Make sure you get a copy from the sheriff and file it with the court.** Note that if there is a court stamp at the top right corner of the first page, it has already been filed and you do not need to file it with the court.
  - If the sheriff was unable to serve your court papers, you should receive a form (sometimes called declaration of due diligence) that tells you that service was unsuccessful and will give details about when the sheriff tried to serve the person. If the sheriff was unable to serve your papers, you can ask a lawyer or court's self-help center about your next steps.
- To find your local court self-help center, go to [www.courts.ca.gov/selfhelp](http://www.courts.ca.gov/selfhelp). Self-help center staff will not act as your lawyer but may be able to give you information to help you decide what to do in your case. Services are free.

### To Sheriff or Marshal

- This form is confidential and must not be made public.
- Any papers submitted with this form should be served and listed on the applicable proof of service form.
- Note that (5) b is optional and may help to identify documents that should have been submitted but were not received by your office.
- Under Government Code section 26666.2, once you've received a completed copy of this form and forms for service, you must attempt service unless:
  - Any order submitted does not have a judge's signature or other representation of a judge's signature; clerk's endorsement; or court stamp, seal, or other court endorsement; or
  - A court case number is not listed on the order, summons, or other notice.

**CONFIDENTIAL**

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