

# MADERA COUNTY SUPERIOR COURT STATE OF CALIFORNIA

## ELDER OR DEPENDENT ADULT ABUSE RESTRAINING ORDER -APPLICANT PACKET

If you need help right now and are in immediate danger, call “911.” You can also call [Adult Protective Services](#) in your county.

1. Make sure the documents are filled out as detailed as possible. Included in this packet you will find helpful information on form [EA-100-INFO](#). Complete the following forms: [EA-100 Request for Elder or Dependent Adult Abuse Restraining Orders](#), [EA-109 Notice of Court Hearing](#), [EA-110 Temporary Restraining Order](#), [CLETS-001 California Law Enforcement Telecommunications System \(CLETS\) Information](#). Forms you **DO NOT** fill out are [EA-120 Response to Request for Elder or Dependent Adult Abuse Restraining Orders](#), [EA-120-INFO How Can I Respond to a Request for Elder or Dependent Adult Abuse Restraining Orders](#), and form [EA-250 Proof of Service of Response by Mail](#); these will be served to the other party.

2. You will need to make two (2) copies of form [EA-100 Request for Elder or Dependent Adult Abuse Restraining Order](#). **NO** copies of form [EA-109 Notice of Court Hearing](#), [EA-110 Temporary Restraining Order](#) and [CLETS-001 Information Form](#). If the Temporary Restraining Order is granted the court will provide you with five (3) certified copies of each.

3. Take your completed documents to the Civil Division (located on the 4<sup>th</sup> Floor). The clerk will deliver your documents to a judge so that a decision can be made on your request for Temporary Restraining Order. The judge generally rules on your request for Temporary Restraining Order within 24 hours from when you file your request. If the judge grants (gives) the temporary orders requested, he or she will make “temporary” orders that only last until your court date. The temporary restraining order expires on the day of your hearing. The judge might not order everything you requested, carefully check your orders. The court will set a hearing date regardless of whether Temporary Restraining Orders were granted or not. Once you get your papers back you must have the other party served before your hearing date, usually **5 days** before your court date. Refer to the “Notice of Hearing [EA-109](#)” form to determine the deadline to serve and what forms must be served on the restrained person.

4. Included in this packet you can find helpful information on [EA-200-INFO What is a “Proof of Personal Service?”](#). Have someone over the age of eighteen NOT you or NOT a protected person in the case; personally, serve the other party with all the documents listed on page 2, item 6 of form [CH-109 Notice of Hearing](#). Have the person who served the other party fill out form [EA-200 Proof of Personal Service](#). Once it is filled out make sure to file the Proof of Service at the Civil Division prior to your next hearing date. You can also ask the Civil Sheriff’s Office to serve for you, the Sheriff will have their own Proof of Service form.

**NOTE: You can also begin the process online, from home, or on one of the public computers located in the Self-Help Office on the 1<sup>st</sup> Floor at [sharpcourts.org](#). (See attached flyer)**

# GET STARTED ON YOUR DOCUMENTS NOW!

You can begin the process from your phone, your computer at home, or one of the computers in the Self Help Center.



## This option is available for these case types:

- Divorce
- Request for and Response to Domestic Violence Restraining Order
- Guardianship
- Name Change
- Request for Order
- Parentage
- Small Claims
- Civil Harassment Restraining Order and Response
- Elder Abuse Restraining Order Petition and Response

## To get started:

- 1** Go to **[www.sharpcourts.org](http://www.sharpcourts.org)** and click on the “Online Resources” tab.
- 2** Select the case type with which you need help.
- 3** We strongly recommend that you create an account so that you do not lose your work. You can note your username and password below. Keep this in a safe place!  
**Username:** \_\_\_\_\_ **Password:** \_\_\_\_\_
- 4** Fill out the prompts.
- 5** When finished, have the Self Help Center review your paperwork. Their information is below.

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### **Madera Family Law Facilitator / Self Help Center**

200 South “G” Street, Madera, CA 93637

Mon-Fri: 8AM - 3PM

(559) 416-5520

[facilitator@madera.courts.ca.gov](mailto:facilitator@madera.courts.ca.gov)



**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 a gun

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 on the Internet at [www.courts.ca.gov](http://www.courts.ca.gov). 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, e-mails, 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 may have to pay a fee for the interpreter. If an interpreter is not available for your court date, you should ask someone who is not listed as a person to be protected on your Request and who is over age 18 to interpret for you.

<b>EA-109</b>		<b>Notice of Court Hearing</b>	
			<small>Clerk stamps date here when form is filed.</small>
<b>1 Elder or Dependent Adult in Need of Protection</b>			
a. Full Name: _____			
<input type="checkbox"/> 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: _____			
			<small>Fill in court name and street address.</small>
			<b>Superior Court of California, County of</b>
			<small>Court fills in case number when form is filed.</small>
			<b>Case Number:</b>
<b>2 Person You Want Protection From</b>			
Full Name: _____			
<i>The court will complete the rest of this form.</i>			
<b>3 Notice of Hearing</b>			
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:			
<b>Hearing Date</b>	Date: _____	Time: _____	_____
	Dept.: _____	Room: _____	_____
<b>4 Temporary Restraining Orders</b> (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) <input type="checkbox"/> All GRANTED until the court hearing.			
(2) <input type="checkbox"/> All DENIED until the court hearing. (Specify reasons for denial in b, below.)			
(3) <input type="checkbox"/> Partly GRANTED and partly DENIED until the court hearing. (Specify reasons for denial in b, below.)			
<small>Judicial Council of California, www.courts.ca.gov New January 1, 2012, Mandatory Form Welfare and Institutions Code, § 15657.03 Approved by DOJ</small>		<b>Notice of Court Hearing</b> (Elder or Dependent Adult Abuse Prevention)	
		<small>EA-109, Page 1 of 3</small>	

**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.

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

*[Local information may be inserted.]*

**What if I am deaf or hard of hearing?**

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 *Request for Accommodations by Persons with Disabilities and Response* (Form MC-410). (Civ.Code, § 54.8.)

**Request for Elder or Dependent Adult Abuse Restraining Orders**

Clerk stamps date here when form is filed.

Read *Can an Elder or Dependent Adult Abuse Restraining Order 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  
MADERA  
200 South G Street  
Madera, CA 93637  
  
Civil Division

Court fills in case number when form is filed.

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

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

Sex:  M  F 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 e-mail.)

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

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

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

E-Mail 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>Sex</u>	<u>Age</u>	<u>Lives with you?</u>	<u>How are they related to you?</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.**



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

8 c. Is the person in 2 a care custodian who deprived the person in 1 of (kept from him or her, did not allow him or her to have or receive, or did not provide him or her 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 him or her):

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.

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

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.

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

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 e-mail, 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.

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

*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*): \_\_\_\_\_

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

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.

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

**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.*

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

**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.*

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

**15** **Guns or Other Firearms and Ammunition**

Does the person in (2) own or possess any guns or other firearms?  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 a gun, other firearm, 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 guns or firearms within his or her 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 fewer 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**  **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 18—Lawyer’s Fees and Costs” for a title.

**19**  **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.)

**This is not a Court Order.**



19  Possession and Protection of Animals continued

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 19a—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.

20 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.

21  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 21—Additional Orders Requested," for a title.

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

22 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 filling out this request

**This is not 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 e-mail.*):

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

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

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

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

Fill in court name and street address:

**Superior Court of California, County of****MADERA**  
200 South G Street  
Madera, CA 93637

Civil Division

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 :****Hearing  
Date** →

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

Dept.: \_\_\_\_\_ Room: \_\_\_\_\_

Name and address of court if different from above:

**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 or 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 set forth on Attachment 4b.

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**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 that you own or possess.**



**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 *Request for Accommodations by Persons with Disabilities and Response* (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



Clerk stamps date here when form is filed.

Fill in court name and street address:

**Superior Court of California, County of  
MADERA**  
200 South G Street  
Madera, CA 93637  
  
Civil Division

Court fills in case number when form is filed.

**Case Number:**

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 e-mail.):

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

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

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

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

**② Restrained Person**

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

Description: Sex:  M  F Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Age: \_\_\_\_\_ Race: \_\_\_\_\_  
Home Address (if known): \_\_\_\_\_  
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:

<u>Full Name</u>	<u>Sex</u>	<u>Age</u>	<u>Household Member?</u>	<u>Relation to Protected Person</u>
_____	_____	_____	<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.**

**Temporary Restraining Order  
(CLETS-TEA or TEF)  
(Elder or Dependent Adult Abuse Prevention)**

**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 e-mail, by text message, 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
  - (2)  Each person in ③
  - (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 person in ①
  - (6)  Other (*specify*):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- 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 Guns or Other Firearms and 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 guns, other firearms, or ammunition.
- b. You must:
  - (1) Sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any guns or other firearms 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 guns or firearms have been turned in, sold, or stored. (*You may use form EA-800, Proof of Firearms Turned In, Sold, or Stored, for the receipt.*)
- c.  The court has received information that you own or possess a firearm.

**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.)*

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

- 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.

**11 Other Orders**

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

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

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

**This is a Court Order.**

**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)

\_\_\_\_\_

\_\_\_\_\_

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****Possession of Guns or Firearms**

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 guns, other firearms, or ammunition 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 guns or other firearms 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 Orders 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 of Enforcement**

**If more than one restraining order has been issued, the orders must be enforced according to the following priorities:** (See Pen. Code, § 136.2; Fam. Code, §§ 6383(h)(2), 6405(b).)

1. *EPO*: If one of the orders is an *Emergency Protective Order* (form EPO-001) and is more restrictive than other restraining or protective orders, it has precedence in enforcement over all other orders.
2. *No-Contact Order*: If there is no EPO, a no-contact order that is included in a restraining or protective order has precedence over any other restraining or protective order.
3. *Criminal Order*: If none of the orders includes a no-contact order, a domestic violence protective order issued in a criminal case takes precedence in enforcement over any conflicting civil court order. Any nonconflicting terms of the civil restraining order remain in effect and enforceable.
4. *Family, Juvenile, or Civil Order*: If more than one family, juvenile, or other civil restraining or protective order has been issued, the one that was issued last 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.**

**California Law Enforcement Telecommunications System (CLETS)  
Information Form**

- This form is submitted with the initial filing (*date*): \_\_\_\_\_
- This is an amended form (*date*): \_\_\_\_\_

**Important:** This form **MUST NOT** become part of the public court file. It is confidential and private.

Fill out as much of this form as you can and give it to the court clerk. If the court issues a restraining order, this form will provide law enforcement with information that will help them enforce it. If any of this information changes, fill out a new (amended) form.

**Case Number** (*if you know it*): \_\_\_\_\_

**1 Person to Be Protected** (*Name*): \_\_\_\_\_

Sex:  M  F Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Race: \_\_\_\_\_

Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address (*listed on restraining order*): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone (*optional*): \_\_\_\_\_

Vehicle (*Type, Model, Year*): \_\_\_\_\_ (*License Number and State*): \_\_\_\_\_

**2 Person to Be Restrained** (*Name*): \_\_\_\_\_

Sex:  M  F Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Race: \_\_\_\_\_

Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

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

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

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

Employer: \_\_\_\_\_

Occupation/Title: \_\_\_\_\_ Work Hours: \_\_\_\_\_

Driver's License Number and State: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Vehicle (*Type, Model, Year*): \_\_\_\_\_ (*License Number and State*): \_\_\_\_\_

Describe any marks, scars, or tattoos: \_\_\_\_\_

Other names used by the restrained person: \_\_\_\_\_

**3 Guns or Firearms** Describe any guns or firearms that you believe the person in **2** owns or has access to (*Number, types, and locations*):

\_\_\_\_\_

\_\_\_\_\_

**4 Other People to Be Protected**

<u>Name</u>	<u>Date of Birth</u>	<u>Sex</u>	<u>Race</u>	<u>Relation to Person in 1</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Additional persons to be protected are listed on Attachment 4.

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

# EA-200 Proof of Personal Service

Clerk stamps date here when form is filed.

## 1 Elder or Dependent Adult in Need of Protection

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

## 2 Person From Whom Protection Is Sought

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

## 3 Notice to Server

The server must:

- Be 18 years of age or older.
- Not be listed in items ①, ③, or ⑥ of form EA-100.
- Give a copy of all documents checked in ④ to the person in ②. (You cannot send them by mail.) Then complete and sign this form and give or mail it to the person in ①.



Fill in court name and street address:

Superior Court of California, County of  
MADERA  
200 South G Street  
Madera, CA 93637  
  
Civil Division

Court fills in case number when form is filed.

Case Number:

## PROOF OF PERSONAL SERVICE

### 4 I gave the person in ② a copy of the forms checked below:

- a.  EA-109, *Notice of Court Hearing*
- b.  EA-110, *Temporary Restraining Order*
- c.  EA-100, *Request for Elder or Dependent Adult Abuse Restraining Orders*
- d.  EA-120, *Response to Request for Elder or Dependent Adult Abuse Restraining Orders* (blank form)
- e.  EA-120-INFO, *How Can I Respond to a Request for Elder or Dependent Adult Abuse Restraining Orders?*
- f.  EA-130, *Elder or Dependent Adult Abuse Restraining Order After Hearing*
- g.  EA-250, *Proof of Service of Response by Mail* (blank form)
- h.  EA-800, *Proof of Firearms Turned In, Sold, or Stored* (blank form)
- i.  Other (specify): \_\_\_\_\_

### 5 I personally gave copies of the documents checked above to the person in ②:

- a. On (date): \_\_\_\_\_ b. At (time): \_\_\_\_\_  a.m.  p.m.
- c. At this address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## 6 Server's Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_

(If you are a registered process server):

County of registration: \_\_\_\_\_ Registration number: \_\_\_\_\_

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 server's name

\_\_\_\_\_  
Server to sign here





**Instructions to the Sheriff, County of Madera**  
 Civil Division – 2725 Falcon Drive – Madera, CA 93637  
 Telephone (559) 675-7737  
 Office Hours: Monday – Friday, 8 am – 5 pm

The Sheriff must have written and signed instructions by the attorney, or the party  
 If he/she has no attorney in accordance with ccp 262; 687.010. The Sheriff is  
 Entitled to his fee whether the service is successful or unsuccessful.

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

**Date/Time Received**  
**(Office Use Only)**

Plaintiff/Petitioner: \_\_\_\_\_

Defendant/Respondent: \_\_\_\_\_

**PERSON(S) TO BE SERVED:**

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

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

City & Zip Code: \_\_\_\_\_ City & Zip Code: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Officer Safety issues \_\_\_\_\_

Best Time for Service \_\_\_\_\_

**SERVICE HOURS ARE FROM 7:00 AM TO 6:00 PM MONDAY –FRIDAY**

DOCUMENTS TO BE SERVED:

- BANK LEVY       EVICTION-WRIT OF POSSESSION       ORDER FOR APPEARANCE & EXAMINATION
- REQUEST FOR ORDER       SMALL CLAIMS – PLAINTIFF/DEFENDANT       SUMMONS & COMPLAINT
- SUMMONS & COMPLAINT – UNLAWFUL DETAINER       SUMMONS & COMPLAINT –UD & PREJUDGMENT
- SUMMONS & PETITION       TEMPORARY RESTRAINING ORDER       OTHER \_\_\_\_\_

Party Requesting Service (or attorney):

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

MAILING ADDRESS: \_\_\_\_\_

CITY AND ZIP CODE: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

<p><b>OFFICE USE ONLY:</b></p> <p><input type="checkbox"/> Cash \$ _____</p> <p><input type="checkbox"/> Check# _____</p> <p><input type="checkbox"/> Fee Waiver</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------

**FEEs  
FOR MOST COMMON SERVICES**

<b>Type of Services</b>	<b>Number of Copies Required (Per Person)</b>	<b>Service Fee (Per Person)</b>
3, 30 or 60 Day Notice	Two (2) of Notice	\$40.00
Cancellation of Service		\$40.00
Citation	Two (2), Both Sides	\$40.00
Civil Subpoena	Two (2), Both Sides	\$40.00
Civil Subpoena - Law Enforcement	Two (2), Both Sides	\$40 plus \$275 witness fee for Deputy
Not Found - Return		\$40.00
Notary Fee		\$15.00 per signature
Order For Appearance and Examination	One (1), Both Sides	\$40.00
Order To Show Cause	One (1), Both Sides	\$40.00
Small Claims - Plaintiff or Defendant	Two (2), Both Sides	\$40.00
Summons and Complaint	Two (2), Each Document	\$40.00
Summons and Complaint-Unlawful Detainer	Two (2), Each Document	\$40.00
Summons and Complaint-Unlawful Detainer and Prejudgment Claim of Right to Possession	Two (3), Each Document	\$40.00
Summons and Petition	One (1), Each Document	\$40.00

<b>Eviction Process</b>	<b>Number of Copies Required (Per Person)</b>	<b>Service Fee (Per Person)</b>
Cancellation of Eviction - Before Service of Notice to Vacate		\$40.00 (Refund of \$105.00)
Cancellation of Eviction - After Service of the Notice to Vacate		\$85.00 + \$40.00 = \$125.00 (Refund of \$20.00)
Notice to Vacate – Reposting after cancellation of eviction	Two (2) Copies of the Writ	\$40.00 (Reposting Fee) + \$40.00 Cancellation Fee = \$80.00 Additional Deposit.
Writ of Possession - Real Property	Original Writ Plus Two (1) Copy	\$145.00

<b>Writ of Execution - Money Judgment</b>	<b>Number of Copies Required</b>	<b>Service Fee</b>
8 Hour Keeper Levy	Original Writ Plus Four (4) Copies	\$240.00
Bank Levy	Original Writ Plus Four (4) Copies	\$40.00
Earnings Withholding Order	Original Writ Plus Two (2) Copies	\$35.00
Third Party Levy	Original Writ Plus Four (4) Copies	\$40.00
Till Tap	Original Writ Plus Four (4) Copies	\$100.00

**\*\* Due to the complexity of Real and Personal Property Levies - the fees and deposits vary.  
Please contact the Levying Officer for an estimated cost of these services \*\***



## DO NOT

WRITE ON THE FOLLOWING BLANK FORMS!  
THESE BLANK FORMS  
MUST BE SERVED ON THE  
OTHER PARTY,  
SO THAT THE OTHER PARTY MAY  
RESPOND TO THIS ACTION.  
ALONG WITH THE BLANK FORMS YOU MUST  
ALSO INCLUDE A COPY OF THE FORMS  
THAT YOU PREPARED AND FILED

## ES NECESARIO

DEJAR LOS SIGUIENTES DOCUMENTOS  
EN BLANCO.  
ESTOS DOCUMENTOS TIENEN QUE  
SER ENTREGADOS A LA OTRA PERSONA,  
PARA QUE PUEDA RESPONDER A ESTA ACCION.  
INCLUYA CON ESTOS DOCUMENTOS UNA COPIA DE  
LOS DOCUMENTOS QUE USTED LLENO Y ARCHIVO.

**Response to Request for Elder or Dependent Adult Abuse Restraining Orders**

Clerk stamps date here when form is filed.

**Use this form to respond to the Request (form EA-100)**

- Read *How Can I Respond to a Request for Elder or Dependent Adult Abuse Restraining Orders?* (form EA-120-INFO) to protect your rights.
- Fill out this form and take it to the court clerk.
- Have someone age 18 or older—**not you**—serve the person requesting protection in ① by mail with a copy of this form and any attached pages. (Use form EA-250, Proof of Service of Response by Mail.)

Fill in court name and street address:

Superior Court of California, County of  
**MADERA**  
 200 South G Street  
 Madera, CA 93637  
 Civil Division

Court fills in case number when form is filed.

**Case Number:**

**① Elder or Dependent Adult Seeking Protection**

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

Name of person asking for the protection, if different (This is the person named in item ③ of the request (form EA-100).)

**② Person From Whom Protection Is Sought**

a. Your Name: \_\_\_\_\_

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. You do not have to give telephone, fax, or e-mail.)

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

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

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

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

Present your response and any opposition at the hearing. Write your hearing date, time, and place from form EA-109, item ③, here:

**Hearing Date** → Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Dept.: \_\_\_\_\_ Room: \_\_\_\_\_

**If you were served with a Temporary Restraining Order, you must obey it until the hearing.** At the hearing, the court may make orders against you that last for up to five years.

**③  Personal Conduct Orders**

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested. (Specify why you disagree in item ⑬ on page 4.)
- c.  I agree to the following orders (specify below or in item ⑬ on page 4):

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

**④  Stay-Away Orders**

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested. (Specify why you disagree in item ⑬ on page 4.)
- c.  I agree to the following orders (specify below or in item ⑬ on page 4):

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

**5**  **Move-Out Orders**

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested. (*Specify why you disagree in item 13 on page 4.*)
- c.  I agree to the following orders (*specify below or in item 13 on page 4*):

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**6**  **Additional Protected Persons**

- a.  I agree that the persons listed in item 6 of form EA-100 may be protected by the order requested.
- b.  I do not agree that the persons listed in item 6 of form EA-100 may be protected by the order requested.

**7**  **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 agree to the orders requested.
- b.  I do not agree to the orders requested. (*Specify why you disagree in item 13 on page 4.*)
- c.  I agree to the following orders (*specify below or in item 13 on page 4*):

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**8** **Guns or Other Firearms and Ammunition**

**If you were served with form EA-110, Temporary Restraining Order, you cannot own or possess any guns, other firearms, or ammunition. (See item 8 of form EA-110.) You must sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any guns or other firearms in your immediate possession or control within 24 hours of being served with form EA-110. You must file a receipt with the court. You may use form EA-800, Proof of Firearms Turned In, Sold, or Stored for the receipt.**

- a.  I do not own or control any guns, firearms, magazines, or ammunition.
- b.  I ask for an exemption from the firearms prohibition under Code of Civil Procedure section 527.9(f) because carrying a firearm is a condition of my employment, and my employer is unable to reassign me to another position where a firearm is unnecessary. (*Explain*):

*Check here if there is not enough space below for your answer. Put your complete answer on an attached sheet of paper and write "Attachment 8b—Firearms Surrender Exemption" as a title. You may use form MC-025, Attachment.*

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- c.  I have turned in my guns and firearms to the police or sold them to or stored them with a licensed gun dealer.
- A copy of the receipt  is attached.  has already been filed with the court.





13  Reasons I Do Not Agree to the Orders Requested

Explain your answers to each order requested that you do not agree with.

Check here if there is not enough space below for your answer. Put your complete answer on an attached sheet of paper and write "Attachment 13—Reasons I Disagree" as a title. You may use form MC-025, Attachment.

Multiple horizontal lines for writing answers.

14  Lawyer's Fees and Costs

a.  I ask the court to order payment of my  lawyer's fees  court costs. The amounts requested are:

Table with 4 columns: Item, Amount, Item, Amount. Includes dollar signs and blank lines for entry.

Check here if there are more items. Put the items and amounts on the attached sheet of paper and write "Attachment 14—Lawyer's Fees and Costs" for a title. You may use form MC-025, Attachment.

b.  I ask the court to deny the request of the person asking for protection named in 1 that I pay his or her lawyer's fees and costs.

15 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

▶ \_\_\_\_\_  
Sign your name

**What is an elder or dependent adult abuse restraining order?**

It is a court order that prohibits you from doing certain things and going certain places.

**What does the order do?**

The court can order you to:

- Not contact the person who is protected by the order
- Stay away from that person and the person's home and workplace
- Move out of the place where you and that person are living together
- Not have any guns as long as the order is in effect

**Who can ask for a restraining order?**

A person who is being:

- Financially abused
- Abandoned or abducted
- Harmed
- Neglected
- Isolated
- Deprived by a caregiver of goods or services necessary to live on

A conservator may seek an order on behalf of an elder or dependent adult.

**I've been served with a request for elder or dependent adult abuse restraining orders. What do I do now?**

Read the papers served on you very carefully. The *Notice of Court Hearing* tells you when to appear in court. There may also be a *Temporary Restraining Order* forbidding you from doing certain things. You must obey the order until the hearing.

**What if I don't obey the order?**

The police can arrest you. You can go to jail and pay a fine.

**What if I don't agree with what the order says?**

You still must obey the order until the hearing. If you disagree with the orders the person is asking for, fill out Form EA-120, *Response to Request for Elder and Dependent Adult Abuse Restraining Orders*, before your hearing date and file it with the court. If you need to include attachments, you can use Form MC-025. You can get the forms from legal publishers or on the Internet at [www.courts.ca.gov](http://www.courts.ca.gov). You also may be able to find them at your local courthouse or county law library.

**Do I have to serve the other person with a copy of my response?**

Yes. Have someone age 18 or older—**not you**—mail a copy of completed Form EA-120 to the person who asked for the order (or that person's lawyer). (This is called "service by mail.")

The person who serves the form by mail must fill out Form EA-250, *Proof of Service of Response by Mail*. Have the person who did the mailing sign the original. Take the completed form back to the court clerk or bring it with you to the hearing.

**Should I go to the court hearing?**

Yes. You should go to court on the date listed on Form EA-109, *Notice of Court Hearing*. If you do not go to the hearing, the judge can make orders against you without hearing from you.

<b>EA-109</b>	<b>Notice of Court Hearing</b>	Clerk stamps date here when form is filed.					
<b>1 Elder or Dependent Adult in Need of Protection</b> a. Full Name: _____ <input type="checkbox"/> 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. <b>Case Number:</b> _____					
<b>2 Person You Want Protection From</b> Full Name: _____  <i>The court will complete the rest of this form.</i>							
<b>3 Notice of Hearing</b> 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: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Hearing Date →</td> <td style="padding: 2px;">Date: _____</td> <td style="padding: 2px;">Time: _____</td> <td style="padding: 2px;">Room: _____</td> <td style="padding: 2px;">Dept.: _____</td> </tr> </table>		Hearing Date →	Date: _____	Time: _____	Room: _____	Dept.: _____	
Hearing Date →	Date: _____	Time: _____	Room: _____	Dept.: _____			
<b>4 Temporary Restraining Orders</b> (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, <i>Request for Elder or Dependent Adult Abuse Restraining Orders</i> are (check only one box below): (1) <input type="checkbox"/> All GRANTED until the court hearing. (2) <input type="checkbox"/> All DENIED until the court hearing. (Specify reasons for denial in b, below.) (3) <input type="checkbox"/> Partly GRANTED and partly DENIED until the court hearing. (Specify reasons for denial in b, below.)							
Judicial Council of California, <a href="http://www.courts.ca.gov">www.courts.ca.gov</a> New January 1, 2012, Mandatory Form Welfare and Institutions Code, § 15657.03 Approved by DOJ		<b>Notice of Court Hearing</b> (Elder or Dependent Adult Abuse Prevention) EA-109, Page 1 of 3					





**How long does the order last?**

If the court issued a temporary restraining order before the hearing, it will last until your hearing date. At that time, the court will decide to continue or cancel the order. Any order issued at the hearing can last for up to five years.

**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 person who asked for the order at the court hearing?**

Yes. Assume that the person who is asking for the order will attend the hearing. Do not talk to him or her unless the judge or that person's attorney says that you can.

**Can I bring a witness to the court hearing?**

Yes. You can bring witnesses or documents that support your case to the hearing. But if possible, you should also bring the witnesses' written statements of what they saw or heard. Their statements must be made under penalty of perjury. You can use Form MC-030 for this.

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

*[Local information may be inserted.]*

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

When you file your papers, ask the clerk if a court interpreter is available. You may have to pay a fee for the interpreter. If an interpreter is not available for your court date, bring someone to interpret for you. You should ask someone age 18 or older to interpret for you.

**What if I have a gun?**

If a restraining order is issued, unless the order is to prevent financial abuse only, you cannot own, possess, or have a gun, other firearm, or ammunition while the order is in effect. If you have a gun or other firearm in your immediate possession or control, you must sell it to or store it with a licensed gun dealer or turn it in to a law enforcement agency.

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

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

**What if I am deaf or hard of hearing?**

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

Clerk stamps date here when form is filed.

**1 Elder or Dependent Adult Seeking Protection**

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

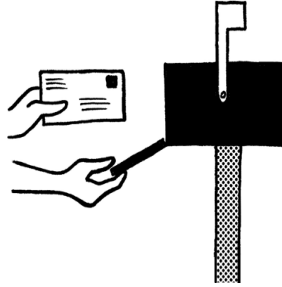
**2 Person From Whom Protection Is Sought**

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

**3 Notice to Server**

The server must:

- Be 18 years of age or older.
- Be a resident or employed in the county where the mailing took place.
- Not be listed in items ①, ③, or ⑥ of Form EA-100.
- Mail a copy of all documents checked in ④ to the person in ①.
- Complete and sign this form and give it to the person in ②.



Fill in court name and street address:

**Superior Court of California, County of MADERA**  
200 South G Street  
same  
Madera, CA 93637  
Civil Division

Fill in case number:

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

**PROOF OF SERVICE BY MAIL**

**4** I am 18 years of age or older and not a party to this proceeding. I live or am employed in the county where the mailing took place. I mailed the person in ① a copy of all documents checked below:

- a. Form EA-120, *Response to Request for Elder or Dependent Adult Abuse Restraining Orders* (completed)
- b.  Other (specify): \_\_\_\_\_

**5** I placed copies of the documents checked above in a sealed envelope and mailed them as described below:

- a. Mailed to (name): \_\_\_\_\_
- b. To this address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- c. On (date): \_\_\_\_\_ Mailed from: City: \_\_\_\_\_ State: \_\_\_\_\_

**6 Server's Information**

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

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

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

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

(If you are a registered process server):

County of registration: \_\_\_\_\_ Registration number: \_\_\_\_\_

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 server's name

▶ \_\_\_\_\_  
Server to sign here