



**SUPERIOR COURT OF CALIFORNIA  
COUNTY OF ORANGE  
SELF-HELP CENTER**

**[www.occourts.org](http://www.occourts.org)**

**DOMESTIC VIOLENCE RESTRAINING ORDER  
(WITH CHILDREN)**

**All documents must be typed or printed neatly.**

**Please use black ink.**

**Self-Help Center Locations:**

Lamoreaux Justice Center

1<sup>st</sup> Floor

341 The City Drive

Orange, CA



Central Justice Center

Room G-100

700 Civic Center Drive

Santa Ana, CA



Superior Court

Service Center

27573 Puerta Real

Mission Viejo, CA

Harbor Justice Center

Room 150

4601 Jamboree Rd

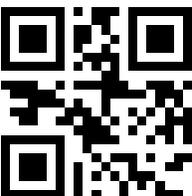
Newport Beach, CA

North Justice Center

Room 360

1275 N. Berkeley Ave.

Fullerton, CA



**What is a “domestic violence restraining order”?**

It is a court order that can help protect people who have been abused or threatened with abuse.

**Can I get a domestic violence restraining order?**

You can ask for one if:

- A person has abused you or threatened to abuse you *and*
- You have one of the following relationships with that person: married, divorced, separated, registered domestic partnership, have a child together, dating or used to date, live together or used to live together\*;
- Or you are related within the second degree of affinity or consanguinity. This means: mother or mother-in-law, father or father-in-law, child or stepchild or legally adopted child, grandparent or grandparent-in-law, grandchild or grandchild-in-law, sister or sister-in-law, brother or brother-in-law, stepparent, daughter-in-law or son-in-law. The in-law must be through a current marriage. (See Family Code § 6211).

\* You have to regularly reside in the household.

**What is abuse?**

Abuse means to intentionally or recklessly cause or attempt to cause bodily injury to you; or sexually assault you; or to place you or another person in reasonable fear of imminent serious bodily injury; or to molest, attack, hit, stalk, threaten, batter, harass, telephone, or contact you; or to disturb your peace; or destroy your personal property. Abuse can be spoken, written, or physical. (See Family Code §§ 6203, 6320).

**How soon can I get the order?**

The judge will decide within one business day whether or not to make any temporary orders. Sometimes the judge decides sooner. Ask the clerk if you should wait or come back later to get copies of the *Notice of Court Hearing* (Form DV-109) and *Temporary Restraining Order* (Form DV-110).

**What if I don't have the relationship necessary to qualify for a domestic violence restraining order?**

There are other kinds of orders you can ask for:

- Civil harassment order (can be used for neighbors, roommates, cousins, uncles, and aunts)
- Dependent adult or elder abuse restraining order
- Workplace violence order

Ask the court clerk for the forms you need for these special kinds of orders, or visit [www.courts.ca.gov](http://www.courts.ca.gov). You may also want to talk to a lawyer.

**How will the restraining order help me?**

The court can order the restrained person to:

- Not contact or go near you, your children, other relatives, or others who live with you
- Not have any guns or ammunition
- Move out of your house
- Obey child custody and visitation orders
- Pay child support
- Pay spousal support
- Obey orders about property

**How do I ask for a domestic violence restraining order?**

The forms are available at any California courthouse or county law library or at: [www.courts.ca.gov/forms](http://www.courts.ca.gov/forms).

You may get assistance in completing and filing your request from the court's self-help center or a legal aid association.

After completing the forms, give them to the clerk of the court. The clerk will write a hearing date on the *Notice of Court Hearing* (Form DV-109). If your request for temporary orders is granted, the clerk will also give you a copy of the *Temporary Restraining Order* (DV-110) signed by a judicial officer.

See Form DV-505-INFO, *How Do I Ask for a Temporary Restraining Order?* to know which forms you need and for steps to follow after you complete the forms.



**How long does the order last?**

If the judge makes a temporary order, it will last until the hearing date. At that time, the judge will decide to continue or cancel the order. The restraining order can last up to 5 years. Child custody, visitation, child support, and spousal support orders can last longer than 5 years and they do not end when the restraining order ends.

**How much does it cost?**

Nothing.

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

Someone who is at least 18—**not you** or anyone else to be protected by the order—must “serve” (give) the person to be restrained a copy of the order in person. The sheriff or marshal will do it for free, but you have to ask. For help with service, ask the court clerk for form DV-200-INFO, *What Is “Proof of Personal Service”?* or visit [www.courts.ca.gov](http://www.courts.ca.gov).

**What if the restrained person doesn't 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. If you do not, your order will end.

**Do I need a lawyer?**

Having a lawyer is always a good idea, especially if you have children, but it is not required. You are not entitled to a free court-appointed lawyer. Ask the court clerk about free and low cost legal services and domestic violence help centers in your county. You can also go to the Family Law Facilitator for help with child support.

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

No. But it helps to have proof of the abuse. You can bring:

- A written statement from a witness, made under oath
- Witnesses
- Photos
- Medical or police reports
- Damaged property
- Threatening letters, e-mails, or telephone messages

The judge may or may not let a witness speak at the hearing.

So if possible, you should bring their written statement under oath to the hearing. (*You can use Form MC-030, Declaration, for this purpose.*)

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

If the restrained 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. Read *Get Ready for the Court Hearing* (Form DV-520-INFO).

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

Yes. You can bring someone to sit with you during the court 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. If the interpreter is not available for your court date, bring someone to interpret for you. Do not ask a child, or anyone to be protected by the order, to interpret for you.

**What if I don't have a green card?**

You can get a restraining order even if you are not a U.S. citizen. If you are worried about deportation, talk to an immigration lawyer.

**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 proceeding. 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). (Civil Code, § 54.8.)

**Need more information?**

Ask the court clerk about free or low-cost legal help. For a referral to a local domestic violence or legal assistance program, call the National Domestic Violence Hotline:

**1-800-799-7233**

**TDD: 1-800-787-3224**

It's free and private.

They can help you in more than 100 languages.

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

No. After the order is issued, only the judge can change or cancel it.

**Can I use the restraining order to get divorced or terminate a registered domestic partnership?**

No. These forms will not end your marriage or registered domestic partnership. You must file other forms to end your marriage or registered domestic partnership.

**Can the order stop the other parent from taking our children away?**

If you get a temporary restraining order that includes an order for custody, the parent with custody may not remove the child from California before notice to the other parent and a court hearing on the request to establish or modify custody. Read the order and Form DV-140, *Child Custody and Visitation Order*, if issued, for any other limits. There are some exceptions. Ask a lawyer.

**What if I want to leave the county or state?**

The restraining order is valid anywhere in the United States. If you move out of California, contact the local police so they will know about your orders.

**1 Use this form as a checklist.**

(Look at the numbers at the top of your forms.)

a. For a restraining order you need these forms:

- [DV-100](#) Request for Domestic Violence Restraining Order
- [CLETS-001](#) (Confidential CLETS Information)
- [DV-109](#) Notice of Court Hearing
- [DV-110](#) Temporary Restraining Order

b. If you have children with the person you want protection from, you also need these forms:

- [DV-105](#) Request for Child Custody and Visitation Orders
- [DV-140](#) Child Custody and Visitation Order

c. If you want child support or spousal/partner support, you also need form:

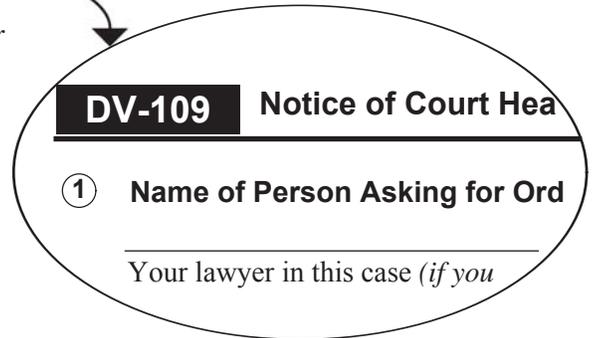
- [FL-150\\*](#) Income and Expense Declaration or
- [FL-155\\*](#) Financial Statement (Simplified)

\* Read *Which Financial Form—FL-155 or FL-150?* (form [DV-570](#)) to know which one is right for you.

d. Ask the clerk if your county has special forms or rules.

e. There are other forms you will need later (*do not fill them out now*):

- [DV-120](#) Response to Request for Domestic Violence Restraining Order
- [DV-130](#) Restraining Order After Hearing (Order of Protection)
- [DV-200](#) Proof of Personal Service



**2 Fill out the forms you need and take them to the court clerk.** The clerk will give your forms to the judge. The judge will look at them and decide whether to make (“grant”) the temporary orders. Sometimes the judge will want to talk to you. If so, the clerk will tell you.

**3 Find out if the judge made the temporary restraining orders.** Ask the clerk when to come back to see if the judge signed the order [form DV-110](#). The judge must decide by the next business day. If the judge grants a temporary restraining order, check it carefully to see what the orders are. The judge might not order everything you requested. The court will set a hearing date on [form DV-109](#) whether or not the judge grants any temporary orders.

**4 "File" the judge's order.** The clerk will keep the original forms for the court and will file-stamp up to three copies for you. If you need more, you may make them yourself.

**What to do with your copies:**

- Keep one copy with you, always. You may need to show it to the police.
- Keep another copy in a safe place.
- Give a copy to anyone else protected by the order.
- Take copies to places where the restrained party is ordered not to go (school, work, child care, etc.)
- Give a copy to the security officers in your apartment building and workplace.

Restraining orders get entered into CLETS, a statewide computer system that lets police know about your order. The court will send the order to law enforcement or CLETS for you.



**5 Know your hearing date: Form DV-109**

Look at [form DV-109](#) for the date and time of your hearing. You **must** go to your hearing to get a permanent order.

The order you have now only lasts for about three weeks. Any orders made on [form DV-110](#) (*Temporary Restraining Order*) will end on the hearing date.

You have the right to cancel the hearing. Read page 2 of [form DV-109](#) for information.

**6 "Serve" the restrained party.**

Ask someone you know, a process server, or law enforcement to personally "serve" (give) the restrained party a copy of the notice of hearing, the order, and other papers. You **cannot** serve the papers yourself. They **cannot** be sent by mail. The server must:

- Be 18 years of age or older
- Not be listed in item **1** or **3** of [form DV-100](#), *Request for Domestic Violence Restraining Order*.

Law enforcement will serve the orders for **free**, but you have to ask.

A "process server" is a business you pay to deliver court forms. Look in the Yellow Pages or on the Internet under "Process Serving."

If law enforcement or the process server uses a different proof of service form, make sure the form lists all the forms served.

**7 File the Proof of Personal Service (Form DV-200).**

The *Proof of Personal Service* shows the judge and police that the restrained person got a copy of the request for orders. Make three copies of the completed *Proof of Personal Service*. Take the original and copies to the court clerk as soon as possible **before your hearing**. The clerk will keep the original and give you back the copies stamped "Filed." Bring a copy to your hearing.

Keep one copy with you and another in a safe place in case you need to show it to the police. Give the other copies out as you did in **4**. The court will send your completed *Proof of Personal Service* to law enforcement or CLETS for you. CLETS is a statewide computer system that lets police know about your order.

If the sheriff serves your order, he or she will send the *Proof of Personal Service* to the court and to CLETS for you.



*Don't serve it by mail!*

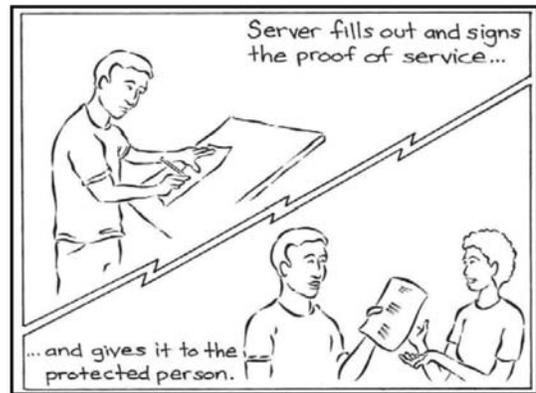


**8 If the restrained party wasn't served . . .**

The restrained party **must** be served before the hearing. If the restrained party wasn't served, fill out [form DV-115](#) (*Request to Continue Hearing*) and the top of [form DV-116](#) (*Order on Request to Continue Hearing*) to ask the judge for a new hearing date. Do this **before** or **at** your hearing. (If you wait until after the hearing, you have to start from the beginning and complete all of the forms again.)

If the judge signs [form DV-116](#), any restraining orders will last until the end of the new hearing.

- File the signed order ([form DV-116](#)) with the clerk. The clerk will send it to law enforcement or CLETS for you.
- Attach form DV-115 and form DV-116 to your other court papers and have the restrained party personally served.
- After serving the orders, the server fills out and signs [form DV-200](#), *Proof of Personal Service*, and gives it to you.
- File the original form DV-200, *Proof of Personal Service*, and bring a copy to your hearing.
- Bring a copy of form DV-115 and form DV-116 to your hearing.

**9 Need help?**

The clerk has information sheets that can help you. Or you can get them at [www.courts.ca.gov/forms](http://www.courts.ca.gov/forms).

- *Can a Domestic Violence Restraining Order Help Me?* ([form DV-500-INFO](#))
- *What Is "Proof of Personal Service"?* ([form DV-200-INFO](#))
- *Get Ready for the Court Hearing* ([form DV-520-INFO](#))
- *How to Enforce Your Restraining Order* ([form DV-530-INFO](#))
- *How Can I Respond to a Request for Domestic Violence Restraining Order?* ([form DV-120-INFO](#))
- *How Do I Ask the Court to Renew My Restraining Order?* ([form DV-700-INFO](#))
- *Which Financial Form—FL-155 or FL-150?* ([form DV-570](#))

**10 Need more help?**

- Ask the court clerk about free or low-cost legal help.
- For a referral to a local domestic violence or legal assistance program, call the National Domestic Violence Hotline:

**1-800-799-7233**

**TDD: 1-800-787-3224**

It's free and private. They can help you in more than 100 languages.

Request for Domestic Violence Restraining Order

Clerk stamps date here when form is filed.

You must also complete form CLETS-001, Confidential CLETS Information, and give it to the clerk when you file this Request.

1 Name of Person Asking for Protection:

Age: \_\_\_\_\_

Your lawyer in this case (if you have one):

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

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

Address (If you have a lawyer for this case, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, give a different mailing address instead. You do not have to give your 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 Orange
341 The City Drive South
Orange, CA 92868
Lamoreaux Justice Center

Court fills in case number when form is filed.

Case Number:

2 Name of Person You Want Protection From:

Description of person you want protection from:

Sex: [ ] M [ ] F Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_
Race: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
Address (if known): \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3 Do you want an order to protect family or household members? [ ] Yes [ ] No

If yes, list them:

Table with columns: Full name, Sex, Age, Lives with you?, Relationship to you. Includes checkboxes for Yes/No.

[ ] Check here if you need more space. Attach a sheet of paper and write "DV-100, Protected People" for a title.

4 What is your relationship to the person in (2) ? (Check all that apply):

- a. [ ] We are now married or registered domestic partners.
b. [ ] We used to be married or registered domestic partners.
c. [ ] We live together.
d. [ ] We used to live together.
e. [ ] We are related by blood, marriage, or adoption (specify relationship): \_\_\_\_\_
f. [ ] We are dating or used to date, or we are or used to be engaged to be married.
g. [ ] We are the parents together of a child or children under 18:
Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

If you do not have one of these relationships, the court may not be able to consider your request. Read form DV-500-INFO for help.

[ ] Check here if you need more space. Attach a sheet of paper and write "DV-100, Additional Children" for a title.

h. [ ] We have signed a Voluntary Declaration of Paternity for our child or children. (Attach a copy if you have one).

This is not a Court Order.



**5 Other Restraining Orders and Court Cases**

- a. Are there any restraining/protective orders currently in place OR that have expired in the last six months (emergency protective orders, criminal, juvenile, family)?  
 No  Yes (*date of order*): \_\_\_\_\_ and (*expiration date*): \_\_\_\_\_ (*Attach a copy if you have one*).

- b. Have you or any other person named in ③ been involved in another court case with the person in ②?  
 No  Yes *If yes, check each kind of case and indicate where and when each was filed:*

Kind of Case	County or Tribe Where Filed	Year Filed	Case Number (if known)
<input type="checkbox"/> Divorce, Nullity, Legal Separation	_____	_____	_____
<input type="checkbox"/> Civil Harassment	_____	_____	_____
<input type="checkbox"/> Domestic Violence	_____	_____	_____
<input type="checkbox"/> Criminal	_____	_____	_____
<input type="checkbox"/> Juvenile, Dependency, Guardianship	_____	_____	_____
<input type="checkbox"/> Child Support	_____	_____	_____
<input type="checkbox"/> Parentage, Paternity	_____	_____	_____
<input type="checkbox"/> Other ( <i>specify</i> ): _____	_____	_____	_____
<input type="checkbox"/> <i>Check here if you need more space. Attach a sheet of paper and write "DV-100, Other Court Cases" for a title.</i>			

**Check the orders you want.**

**6  Personal Conduct Orders**

I ask the court to order the person in ② not to do the following things to me or anyone listed in ③:

- a.  Harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, molest, destroy personal property, disturb the peace, keep under surveillance, impersonate (on the Internet, electronically or otherwise), or block movements
- b.  Contact, either directly or indirectly, in any way, including but not limited to, by telephone, mail or e-mail or other electronic means

*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.*

**7  Stay-Away Order**

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

- Me  My school
- My home  Each person listed in ③
- My job or workplace  The child(ren)'s school or child care
- My vehicle  Other (*specify*): \_\_\_\_\_

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

\_\_\_\_\_

**8  Move-Out Order**

*(If the person in ② lives with you and you want that person to stay away from your home, you must ask for this move-out order.)*

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

\_\_\_\_\_

I have the right to live at the above address because (*explain*):

\_\_\_\_\_

**This is not a Court Order.**



**9 Guns or Other Firearms or Ammunition**

I believe the person in (2) owns or possesses guns, firearms, or ammunition.  Yes  No  I don't know  
*If the judge approves the order, the person in (2) will be ordered not to own, possess, purchase, or receive a firearm or ammunition. The person will be ordered to sell to, or store with, a licensed gun dealer, or turn in to law enforcement, any guns or firearms that he or she owns or possesses.*

**10  Record Unlawful Communications**

I ask for the right to record communications made to me by the person in (2) that violate the judge's orders.

**11  Care of Animals**

I ask for the sole possession, care, and control of the animals listed below. I ask the court to order the person in (2) to stay at least \_\_\_\_\_ yards away from and not take, sell, transfer, encumber, conceal, molest, attack, strike, threaten, harm, or otherwise dispose of the following animals:

\_\_\_\_\_

\_\_\_\_\_

I ask for the animals to be with me because:

\_\_\_\_\_

\_\_\_\_\_

**12  Child Custody and Visitation**

- a.  I do not have a child custody or visitation order and I want one.  
 b.  I have a child custody or visitation order and I want it changed.

*If you ask for orders, you must fill out and attach form DV-105, Request for Child Custody and Visitation Orders. You and the other parent may tell the court that you want to be legal parents of the children (use [form DV-180](#), Agreement and Judgment of Parentage).*

**13  Child Support (Check all that apply):**

- a.  I do not have a child support order and I want one.  
 b.  I have a child support order and I want it changed.  
 c.  I now receive or have applied for TANF, Welfare, CalWORKS, or Medi-Cal.

*If you ask for child support orders, you must fill out and attach [form FL-150](#), Income and Expense Declaration or [form FL-155](#), Financial Statement (Simplified).*

**14  Property Control**

I ask the court to give *only* me temporary use, possession, and control of the property listed here:

\_\_\_\_\_

\_\_\_\_\_

**15  Debt Payment**

I ask the court to order the person in (2) to make these payments while the order is in effect:

*Check here if you need more space. Attach a sheet of paper and write "DV-100, Debt Payment" for a title.*

Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_

**16  Property Restraint**

**I am married to or have a registered domestic partnership with the person in (2).** I ask the judge to order that the person in (2) not borrow against, sell, hide, or get rid of or destroy any possessions or property, except in the usual course of business or for necessities of life. I also ask the judge to order the person in (2) to notify me of any new or big expenses and to explain them to the court.

**17  Spousal Support**

I am married to or have a registered domestic partnership with the person in (2) and no spousal support order exists. I ask the court to order the person in (2) to pay spousal support. (*You must complete, file, and serve [form FL-150](#), Income and Expense Declaration, before your hearing.*)

**This is not a Court Order.**



**18**  **Rights to Mobile Device and Wireless Phone Account**

**a.**  **Property control of mobile device and wireless phone account**

I ask the court to give **only** me temporary use, possession, and control of the following mobile devices: \_\_\_\_\_ and the wireless phone account for the following wireless phone numbers because the account currently belongs to the person in **(2)** :

- (including area code): \_\_\_\_\_  my number  number of child in my care
- (including area code): \_\_\_\_\_  my number  number of child in my care
- (including area code): \_\_\_\_\_  my number  number of child in my care

*Check here if you need more space. Attach a sheet of paper and write "DV-100, Rights to Mobile Device and Wireless Phone Account" for a title.*

**b.**  **Debt Payment**

I ask the court to order the person in **(2)** to make the payments for the wireless phone accounts listed in 18a because:

Name of the wireless service provider is: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due Date: \_\_\_\_\_

*If you are requesting this order, you must complete, file, and serve form FL-150, Income and Expense Declaration, before your hearing.*

**c.**  **Transfer of Wireless Phone Account**

I ask the court to order the wireless service provider to transfer the billing responsibility and rights to the wireless phone numbers listed in 18a to me because the account currently belongs to the person in **(2)** .

*If the judge makes this order, you will be financially responsible for these accounts, including monthly service fees and costs of any mobile devices connected to these phone numbers. You may be responsible for other fees. You must contact the wireless service provider to find out what fees you will be responsible for and whether you are eligible for an account.*

**19**  **Insurance**

I ask the court to order the person in **(2)** NOT to cash, borrow against, cancel, transfer, dispose of, or change the beneficiaries of any insurance or coverage held for the benefit of me or the person in **(2)**, or our child(ren), for whom support may be ordered, or both.

**20**  **Lawyer's Fees and Costs**

I ask that the person in **(2)** pay some or all of my lawyer's fees and costs.

*You must complete, file, and serve form FL-150, Income and Expense Declaration, before your hearing.*

**21**  **Payments for Costs and Services**

I ask the court to order the person in **(2)** to pay the following:

*You can ask for lost earnings or your costs for services caused directly by the person in **(2)** (damaged property, medical care, counseling, temporary housing, etc.). You must bring proof of these expenses to your hearing.*

Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

**22**  **Batterer Intervention Program**

I ask the court to order the person listed in **(2)** to go to a 52-week batterer intervention program and show proof of completion to the court.

**23**  **Other Orders**

What other orders are you asking for? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Check here if you need more space. Attach a sheet of paper and write "DV-100, Other Orders" for a title.*

**This is not a Court Order.**



**24**  **Time for Service (Notice)**

The papers must be personally served on the person in **(2)** at least five days before the hearing, unless the court orders a shorter time for service. If you want there to be fewer than five days between service and the hearing, explain why below. For help, read [form DV-200-INFO](#), “What Is Proof of Personal Service”?

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**25** **No Fee to Serve (Notify) Restrained Person**

If you want the sheriff or marshal to serve (notify) the restrained person about the orders for free, ask the court clerk what you need to do.

**26** **Court Hearing**

The court will schedule a hearing on your request. If the judge does not make the orders effective right away (“temporary restraining orders”), the judge may still make the orders after the hearing. If the judge does not make the orders effective right away, you can ask the court to cancel the hearing. Read [form DV-112, Waiver of Hearing on Denied Request for Temporary Restraining Order](#), for more information.

**27** **Describe Abuse**

Describe how the person in **(2)** abused you. Abuse means to intentionally or recklessly cause or attempt to cause bodily injury to you; or to place you or another person in reasonable fear of imminent serious bodily injury; or to harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, molest, keep you under surveillance, impersonate (on the Internet, electronically or otherwise), batter, telephone, or contact you; or to disturb your peace; or to destroy your personal property. (For a complete definition, see Fam. Code, §§ 6203, 6320.)

a. Date of most recent abuse: \_\_\_\_\_

1. Who was there? \_\_\_\_\_

2. Describe how the person in **(2)** abused you or your child(ren):

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Check here if you need more space. Attach a sheet of paper and write “DV-100, Recent Abuse” for a title.

3. Did the person in **(2)** use or threaten to use a gun or any other weapon?  No  Yes (If yes, describe):

---



---

4. Describe any injuries: \_\_\_\_\_

---



---

5. Did the police come?  No  Yes

If yes, did they give you or the person in **(2)** an Emergency Protective Order?  Yes  No  I don't know  
Attach a copy if you have one.

The order protects  you or  the person in **(2)**

**This is not a Court Order.**



**27 Describe Abuse (continued)**

Has the person in 2 abused you (or your child(ren)) other times?

b. Date of abuse: \_\_\_\_\_

1. Who was there? \_\_\_\_\_

2. Describe how the person in 2 abused you or your child(ren):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check here if you need more space. Attach a sheet of paper and write "DV-100, Recent Abuse" for a title.

3. Did the person in 2 use or threaten to use a gun or any other weapon?  No  Yes (If yes, describe):

4. Describe any injuries: \_\_\_\_\_  
\_\_\_\_\_

5. Did the police come?  No  Yes

If yes, did they give you or the person in 2 an Emergency Protective Order?

Yes  No  I don't know Attach a copy if you have one.

The order protects  you or  the person in 2

If the person in 2 abused you other times, check here  and use [Form DV-101](#), Description of Abuse or describe any previous abuse on an attached sheet of paper and write "DV-100, Previous Abuse" for a title.

**28 Other Persons to Be Protected**

The persons listed in item 3 need an order for protection because (describe): \_\_\_\_\_

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

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

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 your name

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

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

\_\_\_\_\_  
Lawyer's name, if you have one

\_\_\_\_\_  
Lawyer's signature

**This is not a Court Order.**





SHORT TITLE: <hr/>	CASE NUMBER:
-----------------------	--------------

**ATTACHMENT** (Number): \_\_\_\_\_

*(This Attachment may be used with any Judicial Council form.)*

*(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)*

Page \_\_\_\_\_ of \_\_\_\_\_

*(Add pages as required)*

This form is attached to DV-100, Request for Domestic Violence Restraining Order.

Check the orders you want [X].

1 Your name: \_\_\_\_\_ [ ] Mom [ ] Dad [ ] Other\*

2 Other parent's name: \_\_\_\_\_ [ ] Mom [ ] Dad [ ] Other\*

\*If Other, specify relationship to child: \_\_\_\_\_

3 [ ] Child Custody

I ask the court for custody as follows:

Legal Custody to: (Person who makes decisions about health, education, and welfare)

Physical Custody to: (Person you want the child to live with)

Table with columns: Child's Name, Date of Birth, Mom, Dad, Other, Mom, Dad, Other. Rows a, b, c, d.

[ ] Check here if you need more space. Attach a sheet of paper and write "DV-105, Child Custody" for a title.

4 [ ] Change Current Court Order

I want to change a current child custody or visitation court order.

Case Number (if you have it): \_\_\_\_\_ County: \_\_\_\_\_

Explain your current order and why you want a change. \_\_\_\_\_

[ ] Check here if you need more space. Attach a sheet of paper and write "DV-105, Change Current Court Order" for a title.

5 Child's Address

Where has the child in (3)(a) lived for the last 5 years? Give each city and state the child has lived unless it is unknown to the other parent and you want to keep it confidential because of domestic violence or child abuse. Start with where the child lives now and work backwards in time. (If the current address is confidential, check the box below and just provide the current state).

Table with columns: Child (3)(a) addresses (city and state), Child (3)(a) lived with: Mom, Dad, Other, Dates lived there: From, to.

[ ] Check here if you need more space. Attach a sheet of paper and write "DV-105, Child's Address" for a title.

This is not a Court Order.

**6 Other Children's Addresses**

- Check here if the other child's (or children's) address information is the same as listed in 5.
- If it is different, check here. Attach a sheet of paper and write "DV-105, Other Children's Addresses" for a title. List other children's address information, including dates, and name of person child lived with.

**7 Other Custody Case**

Were you involved in, or do you know of, any other custody case for any child listed in this form?

- No  Yes *If yes, fill out below and attach a copy of any custody or visitation orders if you have them:*

a. Name of each child in other custody case: \_\_\_\_\_

- b. Type of case:  Parentage (Paternity)  Divorce  Child Support  Guardianship  
 Juvenile/Dependency  Domestic Violence  
 Other (specify): \_\_\_\_\_

c. I was a  Party  Witness  Other (specify): \_\_\_\_\_

d. Court (name): \_\_\_\_\_

Address: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

e. Date of court order: \_\_\_\_\_

f. Case number (if you have it): \_\_\_\_\_

**8 Other People With or Claiming to Have Custody or Visitation Rights**

Do you know of anyone who is not involved in this case who has or claims to have custody or visitation rights with any child listed on this form?  No  Yes *If yes, fill out below:*

Name and address of that person: \_\_\_\_\_

- Has custody  Claims custody rights  Claims visitation rights

For these children (name of each child): \_\_\_\_\_

- Check here if you need more space. Attach a sheet of paper and write "DV-105, Other People With or Claiming Custody or Visitation" for a title.

**9 Visitation**

I ask the court to order that the person in 2 have the following temporary visitation rights:

(Check all that apply)

- a.  No visitation until the hearing
- b.  No visitation after the hearing
- c.  The following visitation  until the hearing  after the hearing

(1)  **Weekends** (starting): \_\_\_\_\_ (The 1st weekend of the month is the 1st weekend with a Saturday.)

1st  2nd  3rd  4th  5th weekend of month

from \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m. to \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m.  
(day of week) (time) (day of week) (time)

(2)  **Weekdays** (starting): \_\_\_\_\_

from \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m. to \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m.  
(day of week) (time) (day of week) (time)

**This is not a Court Order.**

**10**  **Other Visitation**

Attach a sheet of paper with other visitation days and times, like summer vacation, holidays, and birthdays. List dates and times. Write "DV-105, Visitation" for a title.

**11**  **Responsibility for Transportation**

The parent will take or pick up the child or make arrangements for someone else to do so.

I ask the court to order that:

- a.  Mom  Dad  Other (name): \_\_\_\_\_ **take children to** the visits.
- b.  Mom  Dad  Other (name): \_\_\_\_\_ **pick up children from** the visits.
- c.  Drop-off / pick-up of children will be at (address): \_\_\_\_\_
- d.  Check here if other arrangement. Attach a sheet of paper and write "DV-105, Responsibility for Transportation" for a title.

**12**  **Supervised Visitation**

a. I ask that the visitation in **9** be supervised by

- A professional supervisor  A non-professional supervisor  Other \_\_\_\_\_
- Name and telephone number, if known: \_\_\_\_\_

b. I ask that the visitation in **10** be supervised by

- A professional supervisor  A non-professional supervisor  Other \_\_\_\_\_
- Name and telephone number, if known: \_\_\_\_\_

c. I ask that any costs for supervision be paid by:

Mom \_\_\_\_\_% Dad \_\_\_\_\_% Other (name) \_\_\_\_\_%

**13**  **Travel With Children**

I ask the court to order that:

Mom  Dad  Other (name): \_\_\_\_\_ **must** have written permission from the other parent, or a court order, to take the children outside of:

- a.  The State of California  County of: \_\_\_\_\_
- b.  Other place(s) (list): \_\_\_\_\_

**14**  **Child Abduction Risk**

I believe that there is a risk the other parent will take our child out of California and hide the child from me. If you check this box you must fill out and attach Form DV-108, Request for Order: No Travel with Children.

**Important Instructions**

- You must tell the court if you find out any other information about a custody case in any court for the children listed on this form.
- If the court makes a temporary custody order, the parent receiving custody must not take the child out of California without a noticed hearing. (See Family Code §3063.)

**This is not a Court Order.**

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

This form is attached to DV-105, Request for Child Custody and Visitation Orders.

1 Your name: \_\_\_\_\_  Mom  Dad  Other\*

2 Other parent's name: \_\_\_\_\_  Mom  Dad  Other\*

\*If "Other," specify relationship with children: \_\_\_\_\_

3 Do you think the other parent may take the children without your permission to:

a.  Another county in California?  Yes  No If "yes," what county? \_\_\_\_\_

b.  Another state?  Yes  No If "yes," what state? \_\_\_\_\_

c.  A foreign country?  Yes  No If "yes," what country? \_\_\_\_\_

If "Yes," is the other parent a citizen of that country?  Yes  No

If "Yes," does the other parent have family or emotional ties to that country?  Yes  No

Explain:

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

4 Why do you think the other parent may take the children without your permission?

The other parent: (Check all that apply)

a.  Has violated — or threatened to violate — a custody or visitation order in the past.

b.  Does not have strong ties to California.

c.  Has done things recently that make it easy for him or her to take the children away without permission.

He or she has: (Check all that apply)

Quit his or her job

Sold his or her home

Closed a bank account

Ended a lease

Sold or gotten rid of assets

Hidden or destroyed documents

Applied for a passport, birth certificate, or school or medical records

d.  Has a history of: (Check all that apply)

Domestic violence

Child abuse

Not cooperating with me in parenting

Child abduction

e.  Has a criminal record

f. Please explain your answers to a–e:

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

**This is not a Court Order.**

**What orders do you want? Check the boxes that apply to your case.**

- 5  **Post a Bond**  
I ask the court to order the other parent to post a bond for \$ \_\_\_\_\_. If the other parent takes the children without my permission, I can use this money to bring the children back.
  
- 6  **Do Not Move Without My Permission or Court Order**  
I ask the court to order the other parent *not* to move with the children without my written permission or a court order.
  
- 7  **No Travel Without My Permission**  
I ask the court to order the other parent *not* to travel with the children outside: (*Check all that apply*)  
 This county    California    The United States    Other (*specify*): \_\_\_\_\_
  
- 8  **Notify Other State of Travel Restrictions**  
I ask the court to order the other parent to register this order in the state of \_\_\_\_\_ before the children can travel to that state for visits.
  
- 9  **Turn In and Do Not Apply for Passports or Other Vital Documents**  
I ask the court to order the other parent to turn in and *not* apply for passports or other documents (such as visas or birth certificates) that can be used for travel.
  
- 10  **Provide Itinerary and Other Travel Documents**  
If the other parent is allowed to travel with the children, I ask the court to order the other parent to give me before leaving:  
 The children's travel itinerary  
 Copies of round-trip airline tickets  
 Addresses and telephone numbers where the children can be reached  
 An open airline ticket for me in case the children are not returned  
 Other (*specify*): \_\_\_\_\_
  
- 11  **Notify Foreign Embassy or Consulate of Passport Restrictions**  
I ask the court to order the other parent to notify the embassy or consulate of \_\_\_\_\_ of this order and to provide the court with proof of that notification within \_\_\_\_\_ calendar days.
  
- 12  **Foreign Custody and Visitation Order**  
I ask the court to order the other parent to get a custody and visitation order equal to the most recent U.S. order before the child can travel to that country for visits. I understand that foreign orders may be changed or enforced depending on the laws of the country.
  
- 13  I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

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

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

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

**This is not a Court Order.**

Clerk stamps date here when form is filed.

**1 Name of Person Asking for Order:**

Your lawyer in this case (if you have one):

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

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

**Address** (If you have a lawyer for this case, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, give a different mailing address instead. You do not have to give your 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**

Clerk fills in case number when form is filed.

**Case Number:**

**2 Name of Person to Be Restrained:**

\_\_\_\_\_

*The court will fill out the rest of this form.*

**3 Notice of Court Hearing**

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

<div style="border: 1px solid black; border-radius: 15px; padding: 5px; display: inline-block;"> <b>Hearing Date</b> </div>	→ Date: _____	Time: _____	Name and address of court if different from above: _____ _____ _____
	Dept.: _____	Room: _____	
	_____		

**4 Temporary Restraining Orders (any orders granted are attached on Form DV-110)**

a. Temporary restraining orders for personal conduct, stay away, and protection of animals, as requested in Form DV-100, *Request for Domestic Violence Restraining Order*, are:

- (1)  All **granted** until the court hearing
- (2)  All **denied** until the court hearing (specify reasons for denial in (b)):
- (3)  Partly **granted** and partly **denied** until the court hearing (specify reasons for denial in (b)):

b. Requested temporary restraining orders for personal conduct, stay away, and protection of animals are denied because:

- (1)  The facts as stated in form DV-100 do not show reasonable proof of a past act or acts of abuse. (Family Code, §§ 6320 and 6320.5)
- (2)  The facts do not describe in sufficient detail the most recent incidents of abuse, such as what happened, the dates, who did what to whom, or any injuries or history of abuse.
- (3)  Further explanation of reason for denial, or reason not listed above:

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

**This is a Court Order.**



**5 Service of Documents and Time for Service—for Person in 1**

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

- a. Form DV-100, *Request for Domestic Violence Restraining Order*, (file-stamped) with applicable attachments
- b.  Form DV-110, *Temporary Restraining Order* (file-stamped) with applicable attachments **if granted by the judge**
- c. Form DV-120, *Response to Request for Domestic Violence Restraining Order* (blank form)
- d. Form DV-250, *Proof of Service by Mail* (blank form)
- e.  Other (*specify*): \_\_\_\_\_

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

\_\_\_\_\_  
*Judicial Officer***Right to Cancel Hearing: Information for the Person in 1**

- If item 4(a)(2) or 4(a)(3) is checked, the judge has denied some or all of the temporary orders you requested until the court hearing. The judge may make the orders you want after the court hearing. You can keep the hearing date, or you can cancel your request for orders so there is no court hearing.
- If you want to cancel the hearing, use Form DV-112, *Waiver of Hearing on Denied Request for Temporary Restraining Order*. Fill it out and file it with the court as soon as possible. You may file a new request for orders, on the same or different facts, at a later time.
- If you cancel the hearing, do not serve the documents listed in item 5 on the other person.
- If you want to keep the hearing date, you must have all of the documents listed in item 5 served on the other person within the time listed in item 5.
- At the hearing, the judge will consider whether denial of any requested orders will jeopardize your safety and the safety of children for whom you are requesting custody or visitation.
- You must come to the hearing if you want the judge to make restraining orders or continue any orders already made. If you cancel the hearing or do not come to the hearing, any restraining orders made on Form DV-110 will end on the date of the hearing.

**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 DV-200, *Proof of Personal Service* may be used.
- For information about service, read Form DV-210-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. Read Form DV-115-INFO, *How to Ask for a New Hearing Date*.

**This is a Court Order.**

**To the Person in ②**

- If you want to respond in writing, mail a copy of your completed Form DV-120, *Response to Request for Domestic Violence Restraining Order*, to the person in ① and file it with the court. You cannot mail Form DV-120 yourself. Someone age 18 or older—**not you**—must do it.
- To show that the person in ① has been served by mail, the person who mailed the forms must fill out a proof of service form. Form DV-250, *Proof of Service by Mail*, may be used. File the completed form with the court before the hearing and bring it with you to the hearing.
- For information about responding to a restraining order and filing your answer, read Form DV-120-INFO, *How Can I Respond to a Request for Domestic Violence Restraining Order?*.
- Whether or not you respond in writing, go to the court hearing if you want the judge to hear from you before making orders. 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.**
- **The judge may also make other orders about your children, child support, spousal support, money, and property and may order you to turn in or sell 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). (Civil Code, § 54.8.)

*(Clerk will fill out this part.)*

**—Clerk’s Certificate—**

*Clerk’s Certificate*  
[seal]

I certify that this *Notice of Court Hearing* 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.

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

**① Name of Protected Person:**

Your lawyer in this case (if you have one):

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

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

**Address** (If you have a lawyer for this case, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, give a different mailing address instead. You do not have to give your 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 Orange**  
341 The City Drive South  
Orange, CA 92868  
  
Lamoreaux Justice Center

Court fills in case number when form is filed.

**Case Number:**

**② Name of Restrained Person:**

Description of restrained person:

Sex:  M  F Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Race: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

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

Relationship to protected person: \_\_\_\_\_

**③  Additional Protected Persons**

In addition to the person named in ①, the following persons are protected by temporary orders as indicated in items ⑥ and ⑦ (family or household members):

<u>Full name</u>	<u>Relationship to person in ①</u>	<u>Sex</u>	<u>Age</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Check here if there are additional protected persons. List them on an attached sheet of paper and write, "DV-110, Additional Protected Persons" as a title.

The court will complete the rest of this form.

**④ Court Hearing**

This order expires at the end of the hearing stated below:

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

**This is a Court Order.**



- 5  **Criminal Protective Order**
- a.  A criminal protective order on form CR-160, *Criminal Protective Order—Domestic Violence*, is in effect.  
Case Number: \_\_\_\_\_ County: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
- b.  No information has been provided to the judge about a criminal protective order.

**To the person in 2**

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

- 6 **Personal Conduct Orders**  Not requested  Denied until the hearing  Granted as follows:
- a. You must **not** do the following things to the person in 1 and  persons in 3:
- Harass, attack, strike, threaten, assault (*sexually or otherwise*), hit, follow, stalk, molest, destroy personal property, disturb the peace, keep under surveillance, impersonate (*on the Internet, electronically or otherwise*), or block movements
  - Contact, either directly or indirectly, in any way, including but not limited to, by telephone, mail, e-mail or other electronic means
  - Take any action, directly or through others, to obtain the addresses or locations of the persons in 1 and 3.  
(*If this item is not checked, the court has found good cause not to make this order.*)
- b. Peaceful written contact through a lawyer or process server or another person for service of [Form DV-120](#) (*Response to Request for Domestic Violence Restraining Order*) or other legal papers related to a court case is allowed and does not violate this order.
- c.  Exceptions: Brief and peaceful contact with the person in 1, and peaceful contact with children in 3, as required for court-ordered visitation of children, is allowed unless a criminal protective order says otherwise.

- 7 **Stay-Away Order**  Not requested  Denied until the hearing  Granted as follows:
- a. You **must** stay at least (*specify*): \_\_\_\_\_ yards away from (*check all that apply*):
- The person in 1
  - Home of person in 1
  - The job or workplace of person in 1
  - Vehicle of person in 1
  - School of person in 1
  - The persons in 3
  - The child(ren)'s school or child care
  - Other (*specify*): \_\_\_\_\_
- b.  Exceptions: Brief and peaceful contact with the person in 1, and peaceful contact with children in 3, as required for court-ordered visitation of children, is allowed unless a criminal protective order says otherwise.

- 8 **Move-Out Order**  Not requested  Denied until the hearing  Granted as follows:
- You must take only personal clothing and belongings needed until the hearing and move out immediately from (*address*): \_\_\_\_\_

**This is a Court Order.**



**9 No Guns or Other Firearms or Ammunition**

- 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:
  - Sell to, or store with, a licensed gun dealer, or turn in to a law enforcement agency, any guns or other firearms within your immediate possession or control. Do so within 24 hours of being served with this order.
  - Within 48 hours of receiving this order, file with the court a receipt that proves guns have been turned in, stored, or sold. (You may use [Form DV-800, Proof of Firearms Turned In, Sold, or Stored](#), for the receipt.) Bring a court filed copy to the hearing.
- c.  The court has received information that you own or possess a firearm.

**10 Record Unlawful Communications**

Not requested    Denied until the hearing    Granted as follows:  
 The person in ① can record communications made by you that violate the judge’s orders.

**11 Care of Animals    Not requested    Denied until the hearing    Granted as follows:**

The person in ① is given the sole possession, care, and control of the animals listed below. 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 following animals:

\_\_\_\_\_

\_\_\_\_\_

**12 Child Custody and Visitation    Not requested    Denied until the hearing    Granted as follows:**

Child custody and visitation are ordered on the attached form DV-140, *Child Custody and Visitation Order* or (*specify other form*): \_\_\_\_\_. The parent with temporary custody of the child must not remove the child from California unless the court allows it after a noticed hearing (Fam. Code, § 3063).

**13 Child Support**

Not ordered now but may be ordered after a noticed hearing.

**14 Property Control    Not requested    Denied until the hearing    Granted as follows:**

Until the hearing, *only* the person in ① can use, control, and possess the following property:

\_\_\_\_\_

**15 Debt Payment    Not requested    Denied until the hearing    Granted as follows:**

The person in ② must make these payments until this order ends:

Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_

Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_

**16 Property Restraint    Not requested    Denied until the hearing    Granted as follows:**

If the people in ① and ② are married to each other or are registered domestic partners,  the person in ①  the person in ② must not transfer, borrow against, sell, hide, or get rid of or destroy any property, including animals, except in the usual course of business or for necessities of life. In addition, each person must notify the other of any new or big expenses and explain them to the court. (*The person in ② cannot contact the person in ① if the court has made a “no contact” order.*)

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.

**This is a Court Order.**



**17 Spousal Support**

Not ordered now but may be ordered after a noticed hearing.

**18 Rights to Mobile Device and Wireless Phone Account**

**a. Property control of mobile device and wireless phone account**

Not requested  Denied until the hearing  Granted as follows:

Until the hearing, only the person in ① can use, control, and possess the following property:

Mobile device (describe) \_\_\_\_\_ and account (phone number): \_\_\_\_\_

Mobile device (describe) \_\_\_\_\_ and account (phone number): \_\_\_\_\_

Mobile device (describe) \_\_\_\_\_ and account (phone number): \_\_\_\_\_

Check here if you need more space. Attach a sheet of paper and write "DV-110 Rights to Mobile Device and Wireless Phone Account" as a title.

**b. Debt Payment**  Not requested  Denied until the hearing  Granted as follows:

The person in ② must make these payments until this order ends:

Pay to (wireless service provider): \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_

**c. Transfer of Wireless Phone Account**

Not ordered now but may be ordered after a noticed hearing.

**19 Insurance**

The person in ①  the person in ② is ordered NOT to cash, borrow against, cancel, transfer, dispose of, or change the beneficiaries of any insurance or coverage held for the benefit of the parties, or their child(ren), if any, for whom support may be ordered, or both.

**20 Lawyer's Fees and Costs**

Not ordered now but may be ordered after a noticed hearing.

**21 Payments for Costs and Services**

Not ordered now but may be ordered after a noticed hearing.

**22 Batterer Intervention Program**

Not ordered now but may be ordered after a noticed hearing.

**23 Other Orders**  Not requested  Denied until the hearing  Granted as follows:

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

Check here if there are additional orders. List them on an attached sheet of paper and write "DV-110, Other Orders" as a title.

**24 No Fee to Serve (Notify) Restrained Person**

If the sheriff serves this order, he or she will do so for free.

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

\_\_\_\_\_  
Judge (or Judicial Officer)

**This is a Court Order.**



## Warnings and Notices to the Restrained Person in ②

### If You Do Not Obey This Order, You Can Be Arrested And Charged With a Crime.

- If you do not obey this order, you can go to jail or prison and/or pay a fine.
- It is a felony to take or hide a child in violation of this order.
- If you travel to another state or to tribal lands or make the protected person do so, with the intention of disobeying this order, you can be charged with a federal crime.

### You Cannot Have Guns, Firearms, And/Or Ammunition.



**You cannot own, have, possess, buy or try to buy, receive or try to receive, or otherwise get guns, other firearms, and/or ammunition while the 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. The judge will ask you for proof that you did so. If you do not obey this order, you can be charged with a crime. Federal law says you cannot have guns or ammunition while the order is in effect.**

### Service of Order by Mail

If the judge makes a restraining order at the hearing, which has the same orders as in this form, you will get a copy of that order by mail at your last known address, which is written in ②. If this address is incorrect, or to find out if the orders were made permanent, contact the court.

### Child Custody, Visitation, and Support

- **Child custody and visitation:** If you do not go to the hearing, the judge can make custody and visitation orders for your children without hearing from you.
- **Child support:** The judge can order child support based on the income of both parents. The judge can also have that support taken directly from a parent's paycheck. Child support can be a lot of money, and usually you have to pay until the child is age 18. File and serve a *Financial Statement (Simplified)* (form FL-155) or an *Income and Expense Declaration* (form FL-150) if you want the judge to have information about your finances. Otherwise, the court may make support orders without hearing from you.
- **Spousal support:** File and serve an *Income and Expense Declaration* (form FL-150) so the judge will have information about your finances. Otherwise, the court may make support orders without hearing from you.

## Instructions for Law Enforcement

This order is effective when made. It 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 Law Enforcement Telecommunications System (CLETS). If the law enforcement agency has not received proof of service on the restrained person, and the restrained person was not present at the court hearing, the agency shall advise the restrained person of the terms of the order and then shall enforce it. Violations of this order are subject to criminal penalties.

### 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.

**This is a Court Order.**



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

Even if the protected person invites or consents to contact with the restrained person, the orders remain in effect and must be enforced. The protected person cannot be arrested for inviting or consenting to contact with the restrained person. The orders 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 according to the following priorities (see Pen. Code, § 136.2, and Fam. Code, §§ 6383(h), 6405(b)):**

1. *EPO*: If one of the orders is an *Emergency Protective Order* (form EPO-001), and it 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 in enforcement 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.

**Child Custody and Visitation**

- The custody and visitation orders are on form DV-140, items ③ and ④. They are sometimes also written on additional pages or referenced in DV-140 or other orders that are not part of the restraining order.
- **Forms DV-100 and DV-105 are not orders. Do not enforce them.**

**Certificate of Compliance With VAWA**

This temporary protective order meets all “full faith and credit” requirements of the Violence Against Women Act, 18 U.S.C. § 2265 (1994) (VAWA), upon notice of the restrained person. This court has jurisdiction over the parties and the subject matter; the restrained person has been or will be afforded notice and a timely opportunity to be heard as provided by the laws of this jurisdiction. **This order is valid and entitled to enforcement in each jurisdiction throughout the 50 states of the United States, the District of Columbia, all tribal lands, and all U.S. territories, commonwealths, and possessions and shall be enforced as if it were an order of that jurisdiction.**

*(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.**

Restraining Order After Hearing (Order of Protection)

Clerk stamps date here when form is filed.

Original Order Amended Order

1 Name of Protected Person:

Your lawyer in this case (if you have one):

Name: State Bar No.:

Firm Name:

Address (If you have a lawyer for this case, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, give a different mailing address instead. You do not have to give your 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 Orange
341 The City Drive South
Orange, CA 92868
Lamoreaux Justice Center

Clerk fills in case number when form is filed.

Case Number:

2 Name of Restrained Person:

Description of restrained person:

Sex: M F Height: Weight: Hair Color: Eye Color:

Race: Age: Date of Birth:

Mailing Address (if known):

City: State: Zip:

Relationship to protected person:

3 Additional Protected Persons

In addition to the person named in 1, the following persons are protected by orders as indicated in items 6 and 7 (family or household members):

Table with 4 columns: Full name, Relationship to person in 1, Sex, Age

Check here if there are additional protected persons. List them on an attached sheet of paper and write, "DV-130, Additional Protected Persons," as a title.

4 Expiration Date

The orders, except as noted below, end on

(date): at (time): a.m. p.m. or midnight

- If no date is written, the restraining order ends three years after the date of the hearing in item 5(a).
If no time is written, the restraining order ends at midnight on the expiration date.
Note: Custody, visitation, child support, and spousal support orders remain in effect after the restraining order ends. Custody, visitation, and child support orders usually end when the child is 18.
The court orders are on pages 2, 3, 4, and 5 and attachment pages (if any).

This order complies with VAWA and shall be enforced throughout the United States. See page 5.

This is a Court Order.



**5 Hearings**

- a. The hearing was on (date): \_\_\_\_\_ with (name of judicial officer): \_\_\_\_\_
- b. These people were at the hearing (check all that apply):
- The person in ①       The lawyer for the person in ① (name): \_\_\_\_\_
- The person in ②       The lawyer for the person in ② (name): \_\_\_\_\_
- c. The people in ① and ② must **return to Dept.** \_\_\_\_\_ **of the court** on (date): \_\_\_\_\_  
at (time): \_\_\_\_\_  a.m.    p.m. to review (specify issues): \_\_\_\_\_

**To the person in ②:**

**The court has granted the orders checked below. Item ⑨ is also an order. If you do not obey these orders, you can be arrested and charged with a crime. You may be sent to jail for up to one year, pay a fine of up to \$1,000, or both.**

**6  Personal Conduct Orders**

- a. The person in ② must **not** do the following things to the protected people in ① and ③:
- Harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, molest, destroy personal property, disturb the peace, keep under surveillance, impersonate (on the Internet, electronically or otherwise), or block movements.
- Contact, either directly or indirectly, by any means, including, but not limited to, by telephone, mail, e-mail, or other electronic means.
- Take any action, directly or through others, to obtain the addresses or locations of any protected persons. (If this item is not checked, the court has found good cause not to make this order.)
- b. Peaceful written contact through a lawyer or process server or another person for service of legal papers related to a court case is allowed and does not violate this order.
- c.  Exceptions: Brief and peaceful contact with the person in ①, and peaceful contact with children in ③, as required for court-ordered visitation of children, is allowed unless a criminal protective order says otherwise.

**7  Stay-Away Order**

- a. The person in ② **must** stay at least (specify): \_\_\_\_\_ yards away from (check all that apply):
- The person in ①       School of person in ①
- Home of person in ①       The persons in ③
- The job or workplace of person in ①       The child(ren)'s school or child care
- Vehicle of person in ①       Other (specify): \_\_\_\_\_
- b.  Exceptions: Brief and peaceful contact with the person in ①, and peaceful contact with children in ③, as required for court-ordered visitation of children, is allowed unless a criminal protective order says otherwise.

**8  Move-Out Order**

The person in ② must move out immediately from (address): \_\_\_\_\_

**9 No Guns or Other Firearms or Ammunition**

- a. The person in ② 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.

**This is a Court Order.**

- 9 b. The person in 2 must:
- Sell to, or store with, a licensed gun dealer, or turn in to a law enforcement agency, any guns or other firearms within his or her immediate possession or control. Do so within 24 hours of being served with this order.
  - Within 48 hours of receiving this order, file with the court a receipt that proves guns have been turned in, sold, or stored. ([Form DV-800, Proof of Firearms Turned In, Sold, or Stored](#), may be used for the receipt.) Bring a court filed copy to the hearing.
- c.  The court has received information that the person in 2 owns or possesses a firearm.
- d.  The court has made the necessary findings and applies the firearm relinquishment exemption under Family Code section 6389(h). Under California law, the person in 2 is not required to relinquish this firearm (*specify make, model, and serial number of firearm*): \_\_\_\_\_  
 The firearm must be in his or her physical possession only during scheduled work hours and during travel to and from his or her place of employment. Even if exempt under California law, the person in 2 may be subject to federal prosecution for possessing or controlling a firearm.

10  **Record Unlawful Communications**

The person in 1 has the right to record communications made by the person in 2 that violate the judge's orders.

11  **Care of Animals**

The person in 1 is given the sole possession, care, and control of the animals listed below. 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 following animals: \_\_\_\_\_

12  **Child Custody and Visitation**

Child custody and visitation are ordered on the attached Form DV-140, *Child Custody and Visitation Order* or (*specify other form*): \_\_\_\_\_

13  **Child Support**

Child support is ordered on the attached Form FL-342, *Child Support Information and Order Attachment* or (*specify other form*): \_\_\_\_\_

14  **Property Control**

Only the person in 1 can use, control, and possess the following property: \_\_\_\_\_

15  **Debt Payment**

The person in 2 must make these payments until this order ends:

Pay to: _____	For: _____	Amount: \$ _____	Due date: _____
Pay to: _____	For: _____	Amount: \$ _____	Due date: _____
Pay to: _____	For: _____	Amount: \$ _____	Due date: _____

Check here if more payments are ordered. List them on an attached sheet of paper and write "DV-130, Debt Payments" as a title.

16  **Property Restraint**

The  person in 1  person in 2 must not transfer, borrow against, sell, hide, or get rid of or destroy any property, including animals, except in the usual course of business or for necessities of life. In addition, the person must notify the other of any new or big expenses and explain them to the court. (*The person in 2 cannot contact the person in 1 if the court has made a "No-Contact" order.*)

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.

**This is a Court Order.**



**17**  **Spousal Support**  
Spousal support is ordered on the attached Form FL-343, *Spousal, Partner, or Family Support Order Attachment* or (*specify other form*): \_\_\_\_\_

**18**  **Rights to Mobile Device and Wireless Phone Account**

a.  **Property Control of Mobile Device and Wireless Phone Account**  
Only the person in **(1)** can use, control, and possess the following property:  
Mobile device (*describe*) \_\_\_\_\_ and account (*phone number*): \_\_\_\_\_  
Mobile device (*describe*) \_\_\_\_\_ and account (*phone number*): \_\_\_\_\_  
 *Check here if you need more space. Attach a sheet of paper and write "DV-130 Rights to Mobile Device and Wireless Phone Account" as a title.*

b.  **Debt Payment**  
The person in **(2)** must make these payments until this order ends:  
Pay to (*wireless service provider*): \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_

c.  **Transfer of Wireless Phone Account**  
The court has made an order transferring one or more wireless service accounts from the person in **(2)** to the person in **(1)**. These orders are contained in a separate order (Form DV-900).

**19**  **Insurance**  
 The person in **(1)**  the person in **(2)** is ordered NOT to cash, borrow against, cancel, transfer, dispose of, or change the beneficiaries of any insurance or coverage held for the benefit of the parties, or their child(ren), if any, for whom support may be ordered, or both.

**20**  **Lawyer's Fees and Costs**  
The person in **(2)** must pay the following lawyer's fees and costs:  
Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_  
Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_

**21**  **Payments for Costs and Services**  
The person in **(2)** must pay the following:  
Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_  
Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_  
Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_  
 *Check here if more payments are ordered. List them on an attached sheet of paper and write "DV-130, Payments for Costs and Services" as a title.*

**22**  **Batterer Intervention Program**  
The person in **(2)** must go to and pay for a 52-week batterer intervention program and show written proof of completion to the court. This program must be approved by the probation department under Penal Code § 1203.097. The person in **(2)** must enroll by (*date*): \_\_\_\_\_ or if no date is listed, must enroll within 30 days after the order is made. The person in **(2)** must complete, file and serve Form 805, Proof of Enrollment for Batterer Intervention Program.

**23**  **Other Orders**  
Other orders (*specify*): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**24**  **No Fee to Serve (Notify) Restrained Person**  
If the sheriff or marshal serves this order, he or she will do it for free.

**This is a Court Order.**



**25 Service**

- a.  The people in ① and ② were at the hearing or agreed in writing to this order. No other proof of service is needed.
- b.  The person in ① was at the hearing on the request for original orders. The person in ② was not present.
  - (1)  Proof of service of Form DV-109 and Form DV-110 (if issued) was presented to the court. The judge’s orders in this form are the same as in Form DV-110 except for the end date. The person in ② must be served. This order can be served by mail.
  - (2)  Proof of service of Form DV-109 and Form DV-110 (if issued) was presented to the court. The judge’s orders in this form are different from the orders in Form DV-110, or Form DV-110 was not issued. The person in ② must be personally “served” (given) a copy of this order.
- c.  Proof of service of Form FL-300 to modify the orders in Form DV-130 was presented to the court.
  - (1)  The people in ① and ② were at the hearing or agreed in writing to this order. No other proof of service is needed.
  - (2)  The person in  ①  ② was not at the hearing and must be personally “served” (given) a copy of this amended order.

**26 Criminal Protective Order**

- a.  Form CR-160, *Criminal Protective Order—Domestic Violence*, is in effect.  
Case Number: \_\_\_\_\_ County: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
- b.  Other Criminal Protective Order in effect (*specify*): \_\_\_\_\_  
Case Number: \_\_\_\_\_ County: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
*(List other orders on an attached sheet of paper. Write “DV-130, Other Criminal Protective Orders” as a title.)*
- c.  No information has been provided to the judge about a criminal protective order.

**27 Attached pages are orders.**

- Number of pages attached to this seven-page form: \_\_\_\_\_
- All of the attached pages are part of this order.
- Attachments include (*check all that apply*):  
 DV-140    DV-145    DV-150    FL-342    FL-343    DV-900  
 Other (*specify*): \_\_\_\_\_

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

\_\_\_\_\_  
*Judge (or Judicial Officer)*

**Certificate of Compliance With VAWA**

This restraining (protective) order meets all “full faith and credit” requirements of the Violence Against Women Act, 18 U.S.C. § 2265 (1994) (VAWA) upon notice of the restrained person. This court has jurisdiction over the parties and the subject matter; the restrained person has been or will be afforded notice and a timely opportunity to be heard as provided by the laws of this jurisdiction. **This order is valid and entitled to enforcement in each jurisdiction throughout the 50 states of the United States, the District of Columbia, all tribal lands, and all U.S. territories, commonwealths, and possessions and shall be enforced as if it were an order of that jurisdiction.**

**This is a Court Order.**



**Warnings and Notices to the Restrained Person in 2****If you do not obey this order, you can be arrested and charged with a crime.**

- If you do not obey this order, you can go to jail or prison and/or pay a fine.
- It is a felony to take or hide a child in violation of this order.
- If you travel to another state or to tribal lands or make the protected person do so, with the intention of disobeying this order, you can be charged with a federal crime.

**You cannot have guns, firearms, and/or ammunition.**

**You cannot own, have, possess, buy or try to buy, receive or try to receive, or otherwise get guns, other firearms, and/or ammunition while the order is in effect. If you do, you can go to jail and pay a \$1,000 fine. Unless the court grants an exemption, 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. The judge will ask you for proof that you did so. If you do not obey this order, you can be charged with a crime. Federal law says you cannot have guns or ammunition while the order is in effect. Even if exempt under California law, you may be subject to federal prosecution for possessing or controlling a firearm.**

**Instructions for Law Enforcement****Start Date and End Date of Orders**

The orders *start* on the earlier of the following dates:

- The hearing date in item (5) (a) on page 2, or
- The date next to the judge's signature on this page.

The orders *end* on the expiration date in item (4) on page 1. If no date is listed, they end three years from the hearing date.

**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.

**Notice/Proof of Service**

Law enforcement must first determine if the restrained person had notice of the orders. If notice cannot be verified, the restrained person must be advised of the terms of the orders. If the restrained person then fails to obey the orders, the officer must enforce them. (Fam. Code, § 6383.)

Consider the restrained person "served" (notified) if:

- 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 at the restraining order hearing or was informed of the order by an officer. (Fam. Code, § 6383; Pen. Code, § 836(c)(2).) An officer can obtain information about the contents of the order in the Domestic Violence Restraining Order System (DVROS). (Fam. Code, § 6381(b)-(c).)

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

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

**This is a Court Order.**

## Child Custody and Visitation

The custody and visitation orders are on Form DV-140, items ③ and ④. They are sometimes also written on additional pages or referenced in DV-140 or other orders that are not part of the restraining order.

## Enforcing the Restraining Order in California

Any law enforcement officer in California who receives, sees, or verifies the orders on a paper copy, in the California Law Enforcement Telecommunications System (CLETS), or in an NCIC Protection Order File must enforce the orders.

## 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. *EPO*: If one of the orders is an *Emergency Protective Order* (Form EPO-001) and it 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 in enforcement 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 *Restraining Order After Hearing (Order of Protection)* is a true and correct copy of the original on file in the court.

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

**This is a Court Order.**

This form is attached to (check one):  DV-110  DV-130

1 Name of Protected Person: \_\_\_\_\_  Mom  Dad  Other\*

2 Other Parent's Name: \_\_\_\_\_  Mom  Dad  Other\*

\* If Other, specify relationship to child: \_\_\_\_\_

The Court Orders:

3  Child Custody is ordered as follows:

Legal Custody to: (Person who makes decisions about health, education. Check at least one.)

Physical Custody to: (Person the child lives with. Check at least one.)

Child's Name	Date of Birth	Mom	Dad	Other*	Mom	Dad	Other*
a. _____	_____	<input type="checkbox"/>					
b. _____	_____	<input type="checkbox"/>					
c. _____	_____	<input type="checkbox"/>					

If more children, check here. Attach a sheet of paper and write "DV-140, Child Custody" for a title.

\* If Other, specify relationship to child and name of person: \_\_\_\_\_

4  Child Visitation is ordered as follows:

a.  No visitation to  Mom  Dad  Other (name): \_\_\_\_\_

b.  See the attached \_\_\_\_\_ - page document, dated: \_\_\_\_\_

c.  The parties must go to mediation at: \_\_\_\_\_

d.  Until the next court order, visitation for  Mom  Dad  Other (name): \_\_\_\_\_ will be:

(1)  Weekends (starting): \_\_\_\_\_ (The 1st weekend of the month is the 1st weekend with a Saturday.)

1st  2nd  3rd  4th  5th weekend of month  
from \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m. to \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m.  
(day of week) (time) (day of week) (time)

(2)  Weekdays (starting): \_\_\_\_\_  
from \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m. to \_\_\_\_\_ at \_\_\_\_\_  a.m.  p.m.  
(day of week) (time) (day of week) (time)

(3)  Other Visitation

Check here and attach a sheet of paper if there are other visitation days and times, like holidays, birthdays, sports events. List dates and times. Write "DV- 140, Other Visitation" for a title.

5  Supervised Visitation or Exchange

Visits and/or exchanges of children are supervised as specified on Form DV-150, Supervised Visitation and Exchange Order.

This is a Court Order.

**6**  **Responsibility for Transportation for Visitation**

“Responsibility for transportation” means the parent will take or pick up the child or make arrangements for someone else to do so.

- a.  Mom  Dad  Other (name): \_\_\_\_\_ **take children to** the visits.  
b.  Mom  Dad  Other (name): \_\_\_\_\_ **pick up children from** the visits.  
c.  Drop-off / pick-up of children will be at (address): \_\_\_\_\_
- 

**7**  **Travel with Children**

Mom  Dad  Other (name): \_\_\_\_\_ **must** have written permission from the other parent, or a court order, to take the children outside of:

- a.  The State of California  
b.  The United States of America  
c.  Other place(s) (list): \_\_\_\_\_
- 

**8**  **Child Abduction**

There is a risk that one of the parents will take the children out of California without the other parent’s permission.  The orders in Form DV-145, *Order: No Travel with Children*, are attached and must be obeyed. (Fill out and attach Form DV-145 to this form.)

**9**  **Other Orders**

Check here and attach any other orders to this form. Write “DV-140, Other Orders” as a title.

**10** **Jurisdiction**

This court has jurisdiction to make child custody orders in this case under the Uniform Child Custody Jurisdiction and Enforcement Act (part 3 of the California Family Code starting with § 3400).

**11** **Notice and Opportunity to Be Heard**

The responding party was given reasonable notice and an opportunity to be heard as provided by the laws of the State of California.

**12** **Country of Habitual Residence**

The country of habitual residence of the child or children in this case is  The United States of America or  Other (specify): \_\_\_\_\_.

**13** **Penalties for Violating This Order**

If you violate this order, you may be subject to civil or criminal penalties, or both.

**14** **Duration of Child Custody, Visitation, and Support Orders**

If this form is attached to Form DV-130 (*Restraining Order After Hearing*), the custody and visitation orders in this form remain in effect after the restraining orders on Form DV-130 end.

**This is a Court Order.**

This form is attached to DV-140, Child Custody and Visitation Order.

1 Name of Protected Person: Mom Dad Other\*

2 Other Parent's Name: Mom Dad Other\*

\*If Other, specify relationship to child:

The Court Finds:

3 There is a risk that (name of parent) might take the children without permission because that parent (check all that apply):

- a. Has violated—or threatened to violate—a custody or visitation order in the past
b. Does not have strong ties to California
c. Has done things that make it easy for him or her to take the child without permission.

He or she has (check all that apply):

- Quit his or her job Sold his or her home
Closed a bank account Ended a lease
Sold or gotten rid of assets Hidden or destroyed documents
Applied for a passport, birth certificate, or school or medical records

- d. Has a history of (check all that apply):
Domestic violence
Child abuse
Not cooperating with the other parent in parenting
Taking the children without permission

e. Has a criminal record

f. Has family or emotional ties to another county, state or foreign country

Note: If (f) is checked, at least one other item in items (a)–(e) must be checked also.

The Court Orders:

The Court makes the orders, checked below, to prevent the parent in 3 from taking the children without permission. These orders are valid in other states and any country that has signed The Hague Convention on the Civil Aspects of International Child Abduction.

4 Post a Bond
The parent in 3 must post a bond for \$

5 Do Not Move Without Written Permission of the Other Parent or Court Order

The parent in 3 must not move with the children outside This county California
The United States

Other (specify):
without written permission from the other parent or a court order.

6 Do Not Travel Without Permission of the Other Person or Court Order

The parent in 3 must not travel with the children outside (check all that apply):
This county California The United States Other (specify):
without written permission of the other parent or a court order.

This is a Court Order.



- 7**  **Notify Other State of Travel Restrictions**  
 The parent in **(3)** must register this order in the state of \_\_\_\_\_ before the children can travel to that state for visits.
- 8**  **Turn In and Do Not Apply for Passports or Other Vital Documents**  
 The parent in **(3)** must *not* apply for passports or other documents (such as visas or birth certificates) that can be used for travel, and must turn in the following documents: \_\_\_\_\_
- 9**  **Provide Itinerary and Other Travel Documents**  
 The parent in **(3)** must give the other parent the following before traveling with the children:
- The children's travel itinerary
  - Copies of round-trip airline tickets
  - Addresses and telephone numbers where the children can be reached
  - An open airline ticket for the other parent in case the children are not returned
  - Other (*specify*): \_\_\_\_\_
- 10**  **Notify Foreign Embassy or Consulate of Passport Restrictions**  
 The parent in **(3)** must notify the embassy or consulate of \_\_\_\_\_ of this order and provide the court with proof of that notification within \_\_\_\_\_ calendar days.
- 11**  **Foreign Custody and Visitation Order**  
 The parent in **(3)** must get a foreign custody and visitation order equal to the most recent U.S. order before the children can travel to that country for visits. The court recognizes that foreign orders may be changed or enforced depending on the laws of that country.
- 12**  **Enforcing the Order**  
 The court authorizes any law enforcement officer to enforce this order. In this county, contact the Child Abduction Unit of the Office of the District Attorney at:  
 \_\_\_\_\_
- 13**  **Other**  
 \_\_\_\_\_

**Notice to Authorities in Other States and Countries**

This court has jurisdiction to make child custody orders under California's Uniform Child Custody Jurisdiction and Enforcement Act (California Family Code, part 3, § 3400 et seq.) and The Hague Convention on the Civil Aspects of International Child Abduction (42 U.S.C. § 11601 et seq.). If jurisdiction is based on other factors, they will be listed in paragraph 13 above.

**This is a Court Order.**

This form is attached to  DV-110, *Temporary Restraining Order*  DV-130, *Restraining Order After Hearing*  
 DV-140, *Child Custody and Visitation Order*

① **Name of Protected Person:** \_\_\_\_\_  Mom  Dad  Other\*

② **Other Parent's Name:** \_\_\_\_\_  Mom  Dad  Other\*

\*If Other, specify relationship to child: \_\_\_\_\_

### The Court Orders:

③ **Mediation, Visitation and Exchange**

a.  Parties must go to mediation at: \_\_\_\_\_

b.  Visitation of children is supervised.

Parent to be supervised is:  Mom  Dad  Other (name): \_\_\_\_\_

c.  Exchanges of children are supervised.

④ **Schedule of Supervised Visits**

a.  All visits as provided in the schedule on Form DV-140, item ④(d) are to be supervised.

b.  Supervised visits shall be \_\_\_\_\_ visit(s) per week of \_\_\_\_\_ hours(s) each, to be arranged with the provider.

c.  Other schedule of supervised visits is attached. (Check here and attach a sheet of paper with "DV-150, Other Schedule" for a title.)

⑤ **Type of Provider**

a.  Professional (individual or supervised visitation center)

b.  Nonprofessional

c.  Therapeutic (licensed mental health professional)

⑥ **Provider's Information**

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

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

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

⑦ **Costs Will Be Paid As Follows:**

Mom to pay: \_\_\_\_\_ %

Dad to pay: \_\_\_\_\_ %

Other: \_\_\_\_\_

⑧ **Contact With Provider**

Mom to contact provider before (date): \_\_\_\_\_

Dad to contact provider before (date): \_\_\_\_\_

Other: \_\_\_\_\_

⑨ **The court also orders (specify):** \_\_\_\_\_

**This is a Court Order.**

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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**CHILD SUPPORT INFORMATION AND ORDER ATTACHMENT**

- TO  Findings and Order After Hearing (form FL-340)  Judgment (form FL-180)  
 Restraining Order After Hearing (CLETS-OAH)(form DV-130)  
 Other (specify):

**THE COURT USED THE FOLLOWING INFORMATION IN DETERMINING THE AMOUNT OF CHILD SUPPORT:**

1.  A printout of a computer calculation and findings is attached and incorporated in this order for all required items not filled out below.

2.  **Income**

	<u>Gross monthly</u> <u>income</u>	<u>Net monthly</u> <u>income</u>	<u>Receiving</u> <u>TANF/CalWORKS</u>
a. Each parent's monthly income is as follows:			
Petitioner/plaintiff: \$		\$	<input type="text"/>
Respondent/defendant: \$		\$	<input type="text"/>
Other parent: \$		\$	<input type="text"/>

b. Imputation of income. The court finds that the  petitioner/plaintiff  respondent/defendant  
 other parent has the capacity to earn:  
 \$ \_\_\_\_\_ per \_\_\_\_\_ and has based the support order upon this imputed income.

3.  **Children of this relationship**

- a. Number of children who are the subjects of the support order (specify): \_\_\_\_\_ %  
 b. Approximate percentage of time spent with petitioner/plaintiff: \_\_\_\_\_ %  
 respondent/defendant: \_\_\_\_\_ %  
 other parent: \_\_\_\_\_ %

4.  **Hardships**

Hardships for the following have been allowed in calculating child support:

	<u>Petitioner/ plaintiff</u>	<u>Respondent/ defendant</u>	<u>Other parent</u>	<u>Approximate ending time for the hardship</u>
a. <input type="checkbox"/> Other minor children:	\$	\$	\$	
b. <input type="checkbox"/> Extraordinary medical expenses:	\$	\$	\$	
c. <input type="checkbox"/> Catastrophic losses:	\$	\$	\$	

**THE COURT ORDERS**

5.  **Low-income adjustment**

- a.  The low-income adjustment applies.  
 b.  The low-income adjustment does not apply because (specify reasons):

6.  **Child support**

a. **Base child support**

Petitioner/plaintiff  Respondent/defendant  Other parent must pay child support beginning (date): \_\_\_\_\_ and continuing until further order of the court, or until the child marries, dies, is emancipated, reaches age 19, or reaches age 18 and is not a full-time high school student, whichever occurs first, as follows:

<u>Child's name</u>	<u>Date of birth</u>	<u>Monthly amount</u>	<u>Payable to (name):</u>
---------------------	----------------------	-----------------------	---------------------------

Payable  on the 1st of the month  one-half on the 1st and one-half on the 15th of the month  
 other (specify):

**THIS IS A COURT ORDER.**

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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**THE COURT FURTHER ORDERS**

6. b.  **Mandatory additional child support**

- (1)  Child-care costs related to employment or reasonably necessary job training
- (a)  Petitioner/plaintiff must pay:           % of total or  \$           per month child-care costs.
- (b)  Respondent/defendant must pay:       % of total or  \$           per month child-care costs.
- (c)  Other parent must pay:               % of total or  \$           per month child-care costs.
- (d)  Costs to be paid as follows (*specify*):

c. **Mandatory additional child support**

- (2)  Reasonable uninsured health-care costs for the children
- (a)  Petitioner/plaintiff must pay:           % of total or  \$           per month.
- (b)  Respondent/defendant must pay:       % of total or  \$           per month.
- (c)  Other parent must pay:               % of total or  \$           per month.
- (d)  Costs to be paid as follows (*specify*):

d.  **Additional child support**

- (1)  Costs related to the educational or other special needs of the children
- (a)  Petitioner/plaintiff must pay:           % of total or  \$           per month.
- (b)  Respondent/defendant must pay:       % of total or  \$           per month.
- (c)  Other parent must pay:               % of total or  \$           per month.
- (d)  Costs to be paid as follows (*specify*):
- (2)  Travel expenses for visitation
- (a)  Petitioner/plaintiff must pay:           % of total or  \$           per month.
- (b)  Respondent/defendant must pay:       % of total or  \$           per month.
- (c)  Other parent must pay:               % of total or  \$           per month.
- (d)  Costs to be paid as follows (*specify*):

e.  **Non-Guideline Order**

This order does not meet the child support guideline set forth in Family Code section 4055. *Non-Guideline Child Support Findings Attachment* (form FL-342(A)) is attached.

<b>Total child support per month: \$</b>
--

7. **Health-care expenses**

- a. Health insurance coverage for the minor children of the parties must be maintained by the  petitioner/plaintiff  respondent/defendant  other parent if available at no or reasonable cost through their respective places of employment or self-employment. Both parties are ordered to cooperate in the presentation, collection, and reimbursement of any health-care claims. The parent ordered to provide health insurance must seek continuation of coverage for the child after the child attains the age when the child is no longer considered eligible for coverage as a dependent under the insurance contract, if the child is incapable of self-sustaining employment because of a physically or mentally disabling injury, illness, or condition and is chiefly dependent upon the parent providing health insurance for support and maintenance.
- b.  Health insurance is not available to the  petitioner/plaintiff  respondent/defendant  other parent at a reasonable cost at this time.
- c.  The party providing coverage must assign the right of reimbursement to the other party.

8. **Earnings assignment**

An earnings assignment order is issued. **Note:** The payor of child support is responsible for the payment of support directly to the recipient until support payments are deducted from the payor's wages and for payment of any support not paid by the assignment.

9. In the event that there is a contract between a party receiving support and a private child support collector, the party ordered to pay support must pay the fee charged by the private child support collector. This fee must not exceed 33 1/3 percent of the total amount of past due support nor may it exceed 50 percent of any fee charged by the private child support collector. The money judgment created by this provision is in favor of the private child support collector and the party receiving support, jointly.

10.  **Employment search order (Family Code, § 4505)**

Petitioner/plaintiff  Respondent/defendant  Other parent is ordered to seek employment with the following terms and conditions:

**THIS IS A COURT ORDER.**

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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11. **Other orders** (*specify*):

12. **Notices**

- a. *Notice of Rights and Responsibilities (Health-Care Costs and Reimbursement Procedures) and Information Sheet on Changing a Child Support Order* (form FL-192) must be attached and is incorporated into this order.
- b. If this form is attached to *Restraining Order After Hearing* (form DV-130), the support orders issued on this form (form FL-342) remain in effect after the restraining orders issued on form DV-130 end.

13. **Child Support Case Registry Form**

Both parties must complete and file with the court a *Child Support Case Registry Form* (form FL-191) within 10 days of the date of this order. Thereafter, the parties must notify the court of any change in the information submitted within 10 days of the change by filing an updated form.

**NOTICE: Any party required to pay child support must pay interest on overdue amounts at the legal rate, which is currently 10 percent per year.**

**THIS IS A COURT ORDER.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):    TELEPHONE NO.: E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>  STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	
<b>INCOME AND EXPENSE DECLARATION</b>	CASE NUMBER:

**1. Employment** (Give information on your current job or, if you're unemployed, your most recent job.)

Attach copies of your pay stubs for last two months (black out social security numbers).

- a. Employer:
- b. Employer's address:
- c. Employer's phone number:
- d. Occupation:
- e. Date job started:
- f. If unemployed, date job ended:
- g. I work about \_\_\_\_\_ hours per week.
- h. I get paid \$ \_\_\_\_\_ gross (before taxes)  per month  per week  per hour.

**(If you have more than one job, attach an 8½-by-11-inch sheet of paper and list the same information as above for your other jobs. Write "Question 1—Other Jobs" at the top.)**

**2. Age and education**

- a. My age is (specify):
- b. I have completed high school or the equivalent:  Yes  No If no, highest grade completed (specify):
- c. Number of years of college completed (specify):  Degree(s) obtained (specify):
- d. Number of years of graduate school completed (specify):  Degree(s) obtained (specify):
- e. I have:  professional/occupational license(s) (specify):  
 vocational training (specify):

**3. Tax information**

- a.  I last filed taxes for tax year (specify year):
- b. My tax filing status is  single  head of household  married, filing separately  
 married, filing jointly with (specify name):
- c. I file state tax returns in  California  other (specify state):
- d. I claim the following number of exemptions (including myself) on my taxes (specify):

**4. Other party's income.** I estimate the gross monthly income (before taxes) of the other party in this case at (specify): \$  
This estimate is based on (explain):

**(If you need more space to answer any questions on this form, attach an 8½-by-11-inch sheet of paper and write the question number before your answer.)** Number of pages attached: \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the information contained on all pages of this form and any attachments is true and correct.

Date:

_____ <small>(TYPE OR PRINT NAME)</small>	_____ <small>(SIGNATURE OF DECLARANT)</small>
--	--

PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____ OTHER PARENT/CLAIMANT: _____	CASE NUMBER: _____
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**Attach copies of your pay stubs for the last two months and proof of any other income. Take a copy of your latest federal tax return to the court hearing. (Black out your social security number on the pay stub and tax return.)**

5. **Income** (For average monthly, add up all the income you received in each category in the last 12 months and divide the total by 12.)

	Last month	Average monthly
a. Salary or wages (gross, before taxes) . . . . .	\$ _____	_____
b. Overtime (gross, before taxes) . . . . .	\$ _____	_____
c. Commissions or bonuses . . . . .	\$ _____	_____
d. Public assistance (for example: TANF, SSI, GA/GR) <input type="checkbox"/> currently receiving . . . . .	\$ _____	_____
e. Spousal support <input type="checkbox"/> from this marriage <input type="checkbox"/> from a different marriage . . . . .	\$ _____	_____
f. Partner support <input type="checkbox"/> from this domestic partnership <input type="checkbox"/> from a different domestic partnership . . . . .	\$ _____	_____
g. Pension/retirement fund payments . . . . .	\$ _____	_____
h. Social security retirement (not SSI) . . . . .	\$ _____	_____
i. Disability: <input type="checkbox"/> Social security (not SSI) <input type="checkbox"/> State disability (SDI) <input type="checkbox"/> Private insurance . . . . .	\$ _____	_____
j. Unemployment compensation . . . . .	\$ _____	_____
k. Workers' compensation . . . . .	\$ _____	_____
l. Other (military BAQ, royalty payments, etc.) (specify): . . . . .	\$ _____	_____

6. **Investment income** (Attach a schedule showing gross receipts less cash expenses for each piece of property.)

a. Dividends/interest . . . . .	\$ _____	_____
b. Rental property income . . . . .	\$ _____	_____
c. Trust income . . . . .	\$ _____	_____
d. Other (specify): . . . . .	\$ _____	_____

7. **Income from self-employment, after business expenses for all businesses.** . . . . . \$ \_\_\_\_\_

I am the  owner/sole proprietor  business partner  other (specify): \_\_\_\_\_

Number of years in this business (specify): \_\_\_\_\_

Name of business (specify): \_\_\_\_\_

Type of business (specify): \_\_\_\_\_

**Attach a profit and loss statement for the last two years or a Schedule C from your last federal tax return. Black out your social security number. If you have more than one business, provide the information above for each of your businesses.**

8.  **Additional income.** I received one-time money (lottery winnings, inheritance, etc.) in the last 12 months (specify source and amount): \_\_\_\_\_

9.  **Change in income.** My financial situation has changed significantly over the last 12 months because (specify): \_\_\_\_\_

10. **Deductions** . . . . . Last month

a. Required union dues . . . . .	\$ _____	_____
b. Required retirement payments (not social security, FICA, 401(k), or IRA) . . . . .	\$ _____	_____
c. Medical, hospital, dental, and other health insurance premiums (total monthly amount) . . . . .	\$ _____	_____
d. Child support that I pay for children from other relationships . . . . .	\$ _____	_____
e. Spousal support that I pay by court order from a different marriage . . . . .	\$ _____	_____
f. Partner support that I pay by court order from a different domestic partnership . . . . .	\$ _____	_____
g. Necessary job-related expenses not reimbursed by my employer (attach explanation labeled "Question 10g") . . . . .	\$ _____	_____

11. **Assets** . . . . . Total

a. Cash and checking accounts, savings, credit union, money market, and other deposit accounts . . . . .	\$ _____	_____
b. Stocks, bonds, and other assets I could easily sell . . . . .	\$ _____	_____
c. All other property, <input type="checkbox"/> real and <input type="checkbox"/> personal (estimate fair market value minus the debts you owe) . . . . .	\$ _____	_____

PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____ OTHER PARENT/CLAIMANT: _____	CASE NUMBER: _____
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**12. The following people live with me:**

Name	Age	How the person is related to me? (ex: son)	That person's gross monthly income	Pays some of the household expenses?
a.				<input type="checkbox"/> Yes <input type="checkbox"/> No
b.				<input type="checkbox"/> Yes <input type="checkbox"/> No
c.				<input type="checkbox"/> Yes <input type="checkbox"/> No
d.				<input type="checkbox"/> Yes <input type="checkbox"/> No
e.				<input type="checkbox"/> Yes <input type="checkbox"/> No

**13. Average monthly expenses**       Estimated expenses       Actual expenses       Proposed needs

- |   |   |
|---|---|
| <p>a. Home:</p> <p>(1) <input type="checkbox"/> Rent or <input type="checkbox"/> mortgage... \$ _____</p> <p style="padding-left: 20px;">If mortgage:</p> <p style="padding-left: 40px;">(a) average principal: \$ _____</p> <p style="padding-left: 40px;">(b) average interest: \$ _____</p> <p>(2) Real property taxes . . . . . \$ _____</p> <p>(3) Homeowner's or renter's insurance (if not included above) . . . . . \$ _____</p> <p>(4) Maintenance and repair . . . . . \$ _____</p> <p>b. Health-care costs not paid by insurance. . . \$ _____</p> <p>c. Child care . . . . . \$ _____</p> <p>d. Groceries and household supplies. . . . . \$ _____</p> <p>e. Eating out. . . . . \$ _____</p> <p>f. Utilities (gas, electric, water, trash) . . . . . \$ _____</p> <p>g. Telephone, cell phone, and e-mail . . . . . \$ _____</p> | <p>h. Laundry and cleaning . . . . . \$ _____</p> <p>i. Clothes . . . . . \$ _____</p> <p>j. Education . . . . . \$ _____</p> <p>k. Entertainment, gifts, and vacation. . . . . \$ _____</p> <p>l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.) . . . . . \$ _____</p> <p>m. Insurance (life, accident, etc.; do not include auto, home, or health insurance). . . \$ _____</p> <p>n. Savings and investments. . . . . \$ _____</p> <p>o. Charitable contributions. . . . . \$ _____</p> <p>p. Monthly payments listed in item 14 (itemize below in 14 and insert total here) . . \$ _____</p> <p>q. Other (specify): . . . . . \$ _____</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>r. <b>TOTAL EXPENSES</b> (a-q) (do not add in the amounts in a(1)(a) and (b)) \$ _____</p> </div> <p>s. <b>Amount of expenses paid by others</b> \$ _____</p> |
|---|---|

**14. Installment payments and debts not listed above**

Paid to	For	Amount	Balance	Date of last payment
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

**15. Attorney fees** (This is required if either party is requesting attorney fees.):

- a. To date, I have paid my attorney this amount for fees and costs (specify): \$ \_\_\_\_\_
- b. The source of this money was (specify): \_\_\_\_\_
- c. I still owe the following fees and costs to my attorney (specify total owed): \$ \_\_\_\_\_
- d. My attorney's hourly rate is (specify): \$ \_\_\_\_\_

I confirm this fee arrangement.

Date:

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



\_\_\_\_\_  
(SIGNATURE OF ATTORNEY)

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	CASE NUMBER:
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**CHILD SUPPORT INFORMATION**  
**(NOTE: Fill out this page only if your case involves child support.)**

**16. Number of children**

- a. I have *(specify number)*: \_\_\_\_\_ children under the age of 18 with the other parent in this case.
- b. The children spend \_\_\_\_\_ percent of their time with me and \_\_\_\_\_ percent of their time with the other parent.  
*(If you're not sure about percentage or it has not been agreed on, please describe your parenting schedule here.)*

**17. Children's health-care expenses**

- a.  I do  I do not have health insurance available to me for the children through my job.
- b. Name of insurance company: \_\_\_\_\_
- c. Address of insurance company: \_\_\_\_\_
  
- d. The monthly cost for the **children's** health insurance is or would be *(specify)*: \$ \_\_\_\_\_  
*(Do not include the amount your employer pays.)*

**18. Additional expenses for the children in this case**

Amount per month

- a. Child care so I can work or get job training. . . . . \$ \_\_\_\_\_
- b. Children's health care not covered by insurance . . . . . \$ \_\_\_\_\_
- c. Travel expenses for visitation . . . . . \$ \_\_\_\_\_
- d. Children's educational or other special needs *(specify below)*: . . . . . \$ \_\_\_\_\_

**19. Special hardships.** I ask the court to consider the following special financial circumstances

- (attach documentation of any item listed here, including court orders):*
- |   | Amount per month | For how many months? |
|---|------------------|----------------------|
| a. Extraordinary health expenses not included in 18b. . . . .   | \$ _____         | _____                |
| b. Major losses not covered by insurance (examples: fire, theft, other insured loss) . . . . .          | \$ _____         | _____                |
| c. (1) Expenses for my minor children who are from other relationships and are living with me . . . . . | \$ _____         | _____                |
| (2) Names and ages of those children <i>(specify)</i> :   |                  |                      |

(3) Child support I receive for those children. . . . . \$ \_\_\_\_\_

The expenses listed in a, b, and c create an extreme financial hardship because *(explain)*:

**20. Other information I want the court to know concerning support in my case *(specify)*:**

### INCOME WITHHOLDING FOR SUPPORT

- ORIGINAL INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO)
- AMENDED IWO
- ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT
- TERMINATION of IWO

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

Child Support Enforcement (CSE) Agency     Court     Attorney     Private Individual/Entity (Check One)

**NOTE:** This IWO must be regular on its face. Under certain circumstances you must reject this IWO and return it to the sender (see IWO instructions <http://www.acf.hhs.gov/programs/cse/newhire/employer/publication/publication.htm> - forms). If you receive this document from someone other than a State or Tribal CSE agency or a Court, a copy of the underlying order must be attached.

State/Tribe/Territory \_\_\_\_\_ Remittance Identifier (include w/payment) \_\_\_\_\_  
 City/County/Dist./Tribe \_\_\_\_\_ Order Identifier \_\_\_\_\_  
 Private Individual/Entity \_\_\_\_\_ CSE Agency Case Identifier \_\_\_\_\_

_____ Employer/Income Withholder's Name _____ Employer/Income Withholder's Address _____ _____ Employer/Income Withholder's FEIN _____ _____ Child(ren)'s Name(s) (Last, First, Middle)      Child(ren)' s Birth Date(s) _____ _____ _____ _____ _____	RE: _____ _____ Employee/Obligor's Name (Last, First, Middle) _____ _____ Employee/Obligor's Social Security Number _____ _____ Custodial Party/Obligee's Name (Last, First, Middle) _____ <div style="border: 1px solid black; width: 100%; height: 100%; margin-top: 20px;"></div>
---	--

**ORDER INFORMATION:** This document is based on the support or withholding order from \_\_\_\_\_ (State/Tribe). You are required by law to deduct these amounts from the employee/obligor's income until further notice.

\$ \_\_\_\_\_ Per \_\_\_\_\_ current child support  
 \$ \_\_\_\_\_ Per \_\_\_\_\_ past-due child support - **Arrears greater than 12 weeks?**  Yes  No  
 \$ \_\_\_\_\_ Per \_\_\_\_\_ current cash medical support  
 \$ \_\_\_\_\_ Per \_\_\_\_\_ past-due cash medical support  
 \$ \_\_\_\_\_ Per \_\_\_\_\_ current spousal support  
 \$ \_\_\_\_\_ Per \_\_\_\_\_ past-due spousal support  
 \$ \_\_\_\_\_ Per \_\_\_\_\_ other (must specify) \_\_\_\_\_  
 for a **Total Amount to Withhold** of \$ \_\_\_\_\_ per \_\_\_\_\_.

**AMOUNTS TO WITHHOLD:** You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

\$ \_\_\_\_\_ per weekly pay period      \$ \_\_\_\_\_ per semimonthly pay period (twice a month)  
 \$ \_\_\_\_\_ per biweekly pay period (every two weeks)    \$ \_\_\_\_\_ per monthly pay period  
 \$ \_\_\_\_\_ **Lump Sum Payment:** Do not stop any existing IWO unless you receive a termination order.

**REMITTANCE INFORMATION:** If the employee/obligor's principal place of employment is \_\_\_\_\_ (State/Tribe), you must begin withholding no later than the first pay period that occurs \_\_\_\_\_ days after the date of \_\_\_\_\_. Send payment within \_\_\_\_\_ working days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold up to \_\_\_\_\_% of disposable income for all orders. If the employee/obligor's principal place of employment is not \_\_\_\_\_ (State/Tribe), obtain withholding limitations, time requirements, and any allowable employer fees at [http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact\\_map.htm](http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.htm) for the employee/obligor's principal place of employment.

For electronic payment requirements and centralized payment collection and disbursement facility information (State Disbursement Unit [SDU]), see [http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact\\_map.htm](http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.htm).

Include the **Remittance Identifier with the payment** and if necessary this FIPS code: \_\_\_\_\_

Remit payment to \_\_\_\_\_ (SDU/Tribal Order Payee)  
 at \_\_\_\_\_ (SDU/Tribal Payee Address)

**Return to Sender [Completed by Employer/Income Withholder]**. Payment must be directed to an SDU in accordance with 42 USC §666(b)(5) and (b)(6) or Tribal payee (see Payments to SDU below). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular on its face, you *must* check this box and return the IWO to the sender.

Signature of Judge/Issuing Official (if required by State or Tribal law): \_\_\_\_\_  
 Print Name of Judge/Issuing Official: \_\_\_\_\_  
 Title of Judge/Issuing Official: \_\_\_\_\_  
 Date of Signature: \_\_\_\_\_

If the employee/obligor works in a State or for a Tribe that is different from the State or Tribe that must issued this order, a copy of this IWO must be provided to the employee/obligor.

If checked, the employer/income withholder must provide a copy of this form to the employer/obligor.

**ADDITIONAL INFORMATION FOR EMPLOYERS/INCOME WITHHOLDERS**

State-specific contact and withholding information can be found on the Federal Employer Services website located at: [http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact\\_map.htm](http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.htm)

**Priority:** Withholding for support has priority over any other legal process under State law against the same income (USC 42 §666(b)(7)). If a Federal tax levy is in effect, please notify the sender.

**Combining Payments:** When remitting payments to an SDU or Tribal CSE agency, you may combine withheld amounts from more than one employee/obligor’s income in a single payment. You must, however, separately identify each employee/obligor’s portion of the payment.

**Payments to SDU:** You must send child support payments payable by income withholding to the appropriate SDU or to a Tribal CSE agency. If this IWO instructs you to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), you must check the box above and return this notice to the sender. Exception: If this IWO was sent by a Court, Attorney, or Private Individual/Entity and the initial order was entered before January 1, 1994 or the order was issued by a Tribal CSE agency, you must follow the “Remit payment to” instructions on this form.

**Reporting the Pay Date:** You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor’s wages. You must comply with the law of the State (or Tribal law if applicable) of the employee/obligor’s principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

**Multiple IWOs:** If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to Federal, State, or Tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the State or Tribal law/procedure of the employee/obligor’s principal place of employment to determine the appropriate allocation method.

**Lump Sum Payments:** You may be required to notify a State or Tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments.

**Liability:** If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor’s income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by State or Tribal law/procedure. \_\_\_\_\_

**Anti-discrimination:** You are subject to a fine determined under State or Tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO.

Employer's name: \_\_\_\_\_ Employer FEIN: \_\_\_\_\_  
Employee/Obligor's Name: \_\_\_\_\_  
CSE Agency Case Identifier: \_\_\_\_\_ Order Identifier \_\_\_\_\_

**Withholding Limits:** You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) (15 U.S.C. 1673(b)); or 2) the amounts allowed by the State or Tribe of the employee/obligor's principal place of employment (see *REMITTANCE INFORMATION*). Disposable income is the net income left after making mandatory deductions such as: State, Federal, local taxes; Social Security taxes; statutory pension contributions; and Medicare taxes. The Federal limit is 50% of the disposable income if the obligor is supporting another family and 60% of the disposable income if the obligor is not supporting another family. However, those limits increase 5% - to 55% and 65% - if the arrears are greater than 12 weeks. If permitted by the State or Tribe, you may deduct a fee for administrative costs. The combined support amount and the fee may not exceed the limit indicated in this section.

For Tribal orders, you may not withhold more than the amounts allowed under the law of the issuing Tribe. For Tribal employers/income withholder who receive a State IWO, you may not withhold more than the lesser of the limit set by the law of the jurisdiction in which the employer/income withholder is located or the maximum amount permitted under section 303(d) of the CCPA (15 U.S.C. 1673 (b)).

Depending upon applicable State law or Tribal law, you may need to also consider the amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.

**Arrears greater than 12 weeks?** If the *Order Information* does not indicate that the arrears are greater than 12 weeks, then the Employer should calculate the CCPA limit using the lower percentage.

**Additional Information:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS:** If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, an employer must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the Contact information below:

- This person has never worked for this employer nor received periodic income.
- This person no longer works for this employer nor receives periodic income.

Please provide the following information for the employee/obligor:

Termination date: \_\_\_\_\_ Last known phone number: \_\_\_\_\_  
Last known address \_\_\_\_\_

Final payment date to SDU/Tribal Payee: \_\_\_\_\_ Final payment amount: \_\_\_\_\_  
New employer's name: \_\_\_\_\_  
New employer's address: \_\_\_\_\_

**CONTACT INFORMATION**

**To Employer/Income Withholder:** If you have any questions, contact \_\_\_\_\_ (Issuer name)  
by phone at \_\_\_\_\_, by fax at \_\_\_\_\_, by email or website at: \_\_\_\_\_.

Send termination notice and other correspondence to: \_\_\_\_\_  
\_\_\_\_\_ (Issuer address).

**To Employer/Obligor:** If the employee/obligor has questions, contact \_\_\_\_\_ (Issuer name)  
by phone at \_\_\_\_\_, by fax at \_\_\_\_\_, by email or website at: \_\_\_\_\_.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):     TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<b>COURT PERSONNEL:</b> STAMP DATE RECEIVED HERE   <b>DO NOT FILE</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:  OTHER PARENT:	
<input type="checkbox"/> Mother <input type="checkbox"/> First form completed <input type="checkbox"/> Father <input type="checkbox"/> Change to previous information	CASE NUMBER:

**THIS FORM WILL NOT BE PLACED IN THE COURT FILE. IT WILL BE MAINTAINED IN A CONFIDENTIAL FILE WITH THE STATE OF CALIFORNIA.**

**Notice: Pages 1 and 2 of this form must be completed and delivered to the court along with the court order for support. Pages 3 and 4 are instructional only and do not need to be delivered to the court. If you did not file the court order, you must complete this form and deliver it to the court within 10 days of the date on which you received a copy of the support order. Any later change to the information on this form must be delivered to the court on another form within 10 days of the change. It is important that you keep the court informed in writing of any changes of your address and telephone number.**

1. Support order information (*this information is on the court order you are filing or have received*).
  - a. Date order filed:
  - b.  Initial child support or family support order                       Modification
  - c. Total monthly base current child or family support amount ordered for children listed below, plus any monthly amount ordered payable on past-due support:
 

<u>Child Support:</u> (1) <input type="checkbox"/> Current base child support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order (2) <input type="checkbox"/> Additional monthly support: \$ _____ (3) <input type="checkbox"/> Total past-due support: \$ _____ (4) <input type="checkbox"/> Payment on past-due support: \$ _____	<u>Family Support:</u> <input type="checkbox"/> Current base family support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order <input type="checkbox"/> Additional monthly support: \$ _____ <input type="checkbox"/> Total past-due support: \$ _____ <input type="checkbox"/> Payment on past-due support: \$ _____	<u>Spousal Support:</u> <input type="checkbox"/> Current spousal support: \$ _____ <input type="checkbox"/> Reserved order <input type="checkbox"/> \$0 (zero) order  <input type="checkbox"/> Total past-due support: \$ _____  <input type="checkbox"/> Payment on past-due support: \$ _____
--	--	--
  - (5) Wage withholding was  ordered  ordered but stayed until (date):
2. Person required to pay child or family support (*name*):  
 Relationship to child (*specify*):
3. Person or agency to receive child or family support payments (*name*):  
 Relationship to child (*if applicable*):

**TYPE OR PRINT IN INK**

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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4. The child support order is for the following children:

- |    | <u>Child's name</u> | <u>Date of birth</u> | <u>Social security number</u> |
|----|---------------------|----------------------|-------------------------------|
| a. |                     |                      |                               |
| b. |                     |                      |                               |
| c. |                     |                      |                               |

Additional children are listed on a page attached to this document.

You are required to complete the following information about yourself. You are not required to provide information about the other person, but you are encouraged to provide as much as you can. This form is confidential and will not be filed in the court file. It will be maintained in a confidential file with the State of California.

5. Father's name:

- a. Date of birth:
- b. Social security number:
- c. Street address:

City, state, zip code:

d. Mailing address:

City, state, zip code:

e. Driver's license number:

State:

f. Telephone number:

g.  Employed  Not employed  Self-employed

Employer's name:

Street address:

City, state, zip code:

Telephone number:

6. Mother's name:

- a. Date of birth:
- b. Social security number:
- c. Street address:

City, state, zip code:

d. Mailing address:

City, state, zip code:

e. Driver's license number:

State:

f. Telephone number:

g.  Employed  Not employed  Self-employed

Employer's name:

Street address:

City, state, zip code:

Telephone number:

7.  A restraining order, protective order, or nondisclosure order due to domestic violence is in effect.

- a. The order protects:  Father  Mother  Children
- b. From:  Father  Mother
- c. The restraining order expires on (*date*):

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 PERSON COMPLETING THIS FORM)

# INFORMATION SHEET FOR CHILD SUPPORT CASE REGISTRY FORM

(Do NOT deliver this Information Sheet to the court clerk.)

Please follow these instructions to complete the *Child Support Case Registry Form* (form FL-191) if you do not have an attorney to represent you. Your attorney, if you have one, should complete this form.

Both parents must complete a *Child Support Case Registry Form*. The information on this form will be included in a national database that, among other things, is used to locate absent parents. When you file a court order, you must deliver a completed form to the court clerk along with your court order. If you did not file a court order, you must deliver a completed form to the court clerk **WITHIN 10 DAYS** of the date you received a copy of your court order. If any of the information you provide on this form changes, you must complete a new form and deliver it to the court clerk within 10 days of the change. The address of the court clerk is the same as the one shown for the superior court on your order. This form is confidential and will not be filed in the court file. It will be maintained in a confidential file with the State of California.

## INSTRUCTIONS FOR COMPLETING THE *CHILD SUPPORT CASE REGISTRY FORM* (TYPE OR PRINT IN INK):

If the top section of the form has already been filled out, skip down to number 1 below. If the top section of the form is blank, you must provide this information.

Page 1, first box, top of form, left side: Print your name, address, telephone number, fax number, and e-mail address, if any, in this box. Attorneys must include their State Bar identification numbers.

Page 1, second box, top of form, left side: Print the name of the county and the court's address in this box. Use the same address for the court that is on the court order you are filing or have received.

Page 1, third box, top of form, left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on the court order you are filing or have received.

Page 1, fourth box, top of form, left side: Check the box indicating whether you are the mother or the father. If you are the attorney for the mother, check the box for mother. If you are the attorney for the father, check the box for father. Also, if this is the first time you have filled out this form, check the box by "First form completed." If you have filled out form FL-191 before, and you are changing any of the information, check the box by "Change to previous information."

Page 1, first box, right side: Leave this box blank for the court's use in stamping the date of receipt.

Page 1, second box, right side: Print the court case number in this box. This number is also shown on the court papers.

## Instructions for numbered paragraphs:

1. a. Enter the date the court order was filed. This date is shown in the "COURT PERSONNEL: STAMP DATE RECEIVED HERE" box on page 1 at the top of the order on the right side. If the order has not been filed, leave this item blank for the court clerk to fill in.
- b. If the court order you filed or received is the first child or family support order for this case, check the box by "Initial child support or family support order." If this is a change to your order, check the box by "Modification."
- c. Information regarding the amount and type of support ordered and wage withholding is on the court order you are filing or have received.
  - (1) If your order provides for any type of current support, check all boxes that describe that support. For example, if your order provides for both child and spousal support, check both of those boxes. If there is an amount, put it in the blank provided. If the order says the amount is reserved, check the "Reserved order" box. If the order says the amount is zero, check the "\$0 (zero) order" box. Do not include child care, special needs, uninsured medical expenses, or travel for visitation here. These amounts will go in (2). Do NOT complete the Child Support Case Registry form if you receive spousal support only.
  - (2) If your order provides for a set monthly amount to be paid as additional support for such needs as child care, special needs, uninsured medical expenses or travel for visitation check the box in Item 2 and enter the monthly amount. For example, if your order provides for base child support and in addition the paying parent is required to pay \$300 per month, check the box in item 2 underneath the "Child Support" column and enter \$300. Do NOT check this box if your order provides only for a payment of a percentage, such as 50% of the childcare.

- (3) If your order determined the amount of past due support, check the box in Item 3 that states the type of past due support and enter the amount. For example, if the court determined that there was \$5000 in past due child support and \$1000 in past due spousal support, you would check the box in item 3 in the "Child Support" column and enter \$5000 and you would also check the box in item 3 in the "Spousal Support" column and enter \$1000.
  - (4) If your order provides for a specific dollar amount to be paid towards any past due support, check the box in Item 4 that states the type of past due support and enter the amount. For example, the court ordered \$350 per month to be paid on the past due child support, you would check the box in Item 4 in the "Child Support" column and enter \$350.
  - (5) Check the "ordered" box if wage withholding was ordered with no conditions. Check the box "ordered but stayed until" if wage withholding was ordered but is not to be deducted until a later date. If the court delayed the effective date of the wage withholding, enter the specific date. Check only one box in this item.
2. a. Write the name of the person who is supposed to pay child or family support.  
b. Write the relationship of that person to the child.
  3. a. Write the name of the person or agency supposed to receive child or family support payments.  
b. Write the relationship of that person to the child.
  4. List the full name, date of birth, and social security number for each child included in the support order. If there are more than five children included in the support order, check the box below item 4e and list the remaining children with dates of birth and social security numbers on another sheet of paper. Attach the other sheet to this form.

The local child support agency is required, under section 466(a)(13) of the Social Security Act, to place in the records pertaining to child support the social security number of any individual who is subject to a divorce decree, support order, or paternity determination or acknowledgment. This information is mandatory and will be kept on file at the local child support agency.

Top of page 2, box on left side: Print the names of the petitioner/plaintiff, respondent/defendant, and other parent in this box. Use the same names listed on page 1.

Top of page 2, box on right side: Print your court case number in this box. Use the same case number as on page 1, second box, right side.

You are required to complete information about yourself. If you know information about the other person, you may also fill in what you know about him or her.

5. If you are the father in this case, list your full name in this space. See instructions for a–g under item 6 below.
6. If you are the mother in this case, list your full name in this space.
  - a. List your date of birth.
  - b. Write your social security number.
  - c. List the street address, city, state, and zip code where you live.
  - d. List the street address, city, state, and zip code where you want your mail sent, if different from the address where you live.
  - e. Write your driver's license number and the state where it was issued.
  - f. List the telephone number where you live.
  - g. Indicate whether you are employed, not employed, self-employed, or by checking the appropriate box. If you are employed, write the name, street address, city, state, zip code, and telephone number where you work.
7. If there is a restraining order, protective order, or nondisclosure order, check this box.
  - a. Check the box beside each person who is protected by the restraining order.
  - b. Check the box beside the parent who is restrained.
  - c. Write the date the restraining order expires. See the restraining order, protective order, or nondisclosure order for this date.

If you are in fear of domestic violence, you may want to ask the court for a restraining order, protective order, or nondisclosure order.

You must type or print your name, fill in the date, and sign the *Child Support Case Registry Form* under penalty of perjury. When you sign under penalty of perjury, you are stating that the information you have provided is true and correct.

**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.

<b>Case Number</b> ( <i>if you know it</i> ): _____
---

**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>

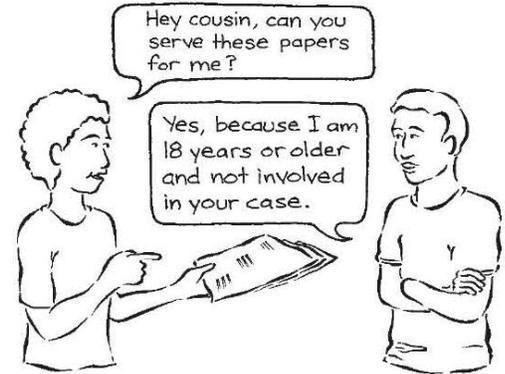
- Additional persons to be protected are listed on Attachment 4.

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

**What is "service"?**

Service is the act of giving your legal papers to the other party in the case. There are many kinds of service—in person, by mail, and others. This form is about personal, or “in-person,” service. The *Notice of Court Hearing* ([form DV-109](#)), *Request for Domestic Violence Restraining Order* ([form DV-100](#)), and *Temporary Restraining Order* ([form DV-110](#)) must be served “in person.” That means someone—not you or anyone else protected by the order—must personally “serve” (give) the party to be restrained a copy of the forms. You cannot send them by mail. Service lets the other party know:

- What orders you are asking for
- The hearing date
- How to respond



**Why do I have to get the orders served?**

- The *police cannot arrest* anyone for violating an order *unless* the restrained party knows about the order.
- The *judge cannot make the orders permanent* unless the restrained party was served.

**Who can serve?**

Ask someone you know, a process server, or a law enforcement agency (for example, a sheriff) to personally serve (give) a copy of the orders to the party to be restrained. You *cannot* send the forms to that person by mail.

The server must:

- Be 18 years of age or over
- Not be you or anyone to be protected by the orders



*Don't serve it by mail!*

A sheriff can serve the order at no cost to you.

A “registered process server” is a business you pay to deliver court forms. Look for “Process Serving” in the Yellow Pages or on the Internet.

(Note: If a law enforcement agency or the process server uses a different proof of service form, make sure it lists the forms served.)

**How does the server "serve" the legal papers?**

Ask the server to:

- Walk up to the person to be served.
- Make sure it's the right person. Ask the person's name.
- Give the person copies of all papers checked on [form DV-200](#), *Proof of Personal Service*.
- Fill out and sign [form DV-200](#).
- Give the signed [form DV-200](#) to you.

**What if the person won't take the papers or tears them up?**

- If the person won't take the papers, just leave them near him or her.
- It doesn't matter if the person tears them up.



**When do the orders have to be served?**

It depends. To know the exact date, you have to look at two things on [form DV-109](#):

First, look at the hearing date on page 1. Next, look at the number of days written in item ⑤ on page 2.

③ **Notice of Court Hearing**  
A court hearing is scheduled on the requested date.

Hearing Date	Date: _____	Time: _____
	Dept.: _____	Room: _____

⑤ **Service of Documents and Time for Service**  
At least  five or  \_\_\_\_\_ days before the hearing, the person who is **protected**—must personally give (serve) a copy of the **Hearing** to the person in ② along with a copy of:

- Form DV-100, *Request for Domestic Violence Restraining Order*
- Form DV-110, *Temporary Restraining Order*  
judge
- Form DV-120, *Response to Request for Restraining Order*  
Form DV-250, *Proof of Personal Service*

Look at a calendar. Subtract the number of days in item ⑤ from the hearing date. That's the final date to have the orders served. It's always OK to serve earlier than that date.

If nothing is written in item ⑤, you must have the papers served at least five days before the hearing.

**Who signs the *Proof of Personal Service*?**

Only the person who serves the orders can sign the *Proof of Personal Service* ([form DV-200](#)). You do not sign it. The person to be restrained does not sign it.

**What happens if I cannot get the papers served before the hearing date?**

Forms DV-100, DV-109, and DV-110 must be personally served before the hearing. If not, before your hearing, fill out and file a *Request to Continue Hearing* ([form DV-115](#)) and *Order on Request to Continue Hearing* ([form DV-116](#)). These forms ask the judge for a new hearing date and make any temporary orders last until the end of the new hearing. Ask the clerk for the forms, or go to [www.courts.ca.gov](http://www.courts.ca.gov).

You **must** attach a copy of [form DV-115](#) and [DV-116](#) to a copy of your original order. That way, the police will know your orders are still in effect. And the restrained party will be served with notice of the new hearing date. For more information on getting a new hearing date, read [form DV-115-INFO](#), *How to Ask for a New Hearing Date*.

**What do I do with the completed *Proof of Personal Service*?**

**Bring a copy of the original *Proof of Personal Service* ([form DV-200](#)) to your hearing.**

If the sheriff serves the orders, he or she will send the *Proof of Personal Service* to the court and CLETS (California Law Enforcement Telecommunications System), a statewide computer system that lets police know about your order, for you.

If someone other than the sheriff serves the orders, you should:

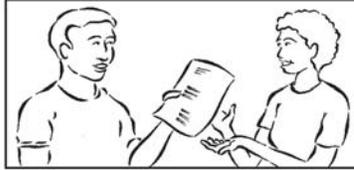
- If possible, file the original *Proof of Personal Service* ([form DV-200](#)) with the court at least two days before your hearing. If you were unable to do so, bring the original *Proof of Personal Service* to your hearing.
- The clerk will send it to CLETS.
- Always keep an extra copy of the restraining orders with you for your safety.

Clerk stamps date here when form is filed.

**1** Name of Party Asking for Protection:**2** Name of Party to Be Restrained:**3** Notice to Server

The server must:

- Be 18 years of age or older.
- Not be listed in items **1** or **3** of form DV-100, *Request for Domestic Violence Restraining Order*.
- Give a copy of all documents checked in **4** to the restrained party in **2** (you cannot send them by mail). Then complete and sign this form, and give or mail it to the party in **1**.



Fill in court name and street address:

**Superior Court of California, County of Orange**  
 341 The City Drive  
 Orange, CA 92868  
 Lamoreaux Justice Center

Court clerk fills in case number when form is filed.

**Case Number:****4** I gave the party in **2** a copy of all the documents checked:

- a.  DV-109 with DV-100 and a blank [DV-120](#) (*Notice of Court Hearing; Request for Domestic Violence Restraining Order; blank Response to Request for Domestic Violence Restraining Order*)
- b.  DV-110 (*Temporary Restraining Order*)
- c.  DV-105 and DV-140 (*Request for Child Custody and Visitation Orders, Child Custody and Visitation Order*)
- d.  FL-150 with a blank [FL-150](#) (*Income and Expense Declaration*)
- e.  FL-155 with a blank [FL-155](#) (*Financial Statement (Simplified)*)
- f.  DV-115 (*Request to Continue Hearing*)
- g.  DV-116 (*Order on Request to Continue Hearing*)
- h.  DV-130 (*Restraining Order After Hearing*)
- i.  Other (*specify*):

**5** I personally gave copies of the documents checked above to the party in **2** on:a. Date: \_\_\_\_\_ b. 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: \_\_\_\_\_

**7** 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



## INFORMATION SHEET—EX PARTE MATTERS

### NOTICE REQUIREMENTS

#### **ALL EX PARTE APPLICATIONS EXCEPT DOMESTIC VIOLENCE, ELDER AND DEPENDENT ADULT ABUSE MATTERS AND DISCOVERY MOTIONS.**

Notice must be given by telephone or in writing to the self-represented party or to the opposing attorney so that it is received not later than **10:00 a.m.** on the **court day before the ex parte matter will be presented to the judicial officer.** A party may request the notice be waived by writing a declaration signed under penalty of perjury which explains facts showing good cause not to give the notice. A judicial officer may approve a waiver of notice for good cause.

#### **EX PARTE APPLICATIONS WHICH INVOLVE DOMESTIC VIOLENCE, ELDER ABUSE, OR DEPENDENT ADULT ABUSE MATTERS**

Notice must be given by telephone or in writing to the self-represented party or to the opposing attorney so that it is received not later than **four (4) hours** before the time **the ex parte matter will be presented to the judicial officer.** A party may request the notice be waived by writing a declaration signed under penalty of perjury which explains facts showing good cause not to give the notice. A judicial officer may approve a waiver of notice for good cause.

#### **ALL EX PARTE APPLICATIONS**

1. Notice of the Ex Parte Application must include:
  - a. A statement of the relief being requested from the court (example: a request to continue the trial; a restraining order is requested)
  - b. A statement that the opposing party is entitled to attend the court hearing in person or by an attorney when the Ex Parte Application is presented to the court
  - c. The name and address of the court where the Ex Parte Application will be presented.
    - (1) If a case is *not* previously assigned to a specific judicial officer, the notice must instruct the responding party to appear at a specific time in the Family Law Clerk's Office (7<sup>th</sup> Floor) at Lamoreaux Justice Center, 341 The City Drive, Orange, California 92868. The Clerk's Office will direct the parties to the appropriate courtroom.
    - (2) If a case is previously assigned to a judicial officer for all purposes, then the notice must instruct the responding party to appear in that Department at a specific time and date.
      - (a) Departments beginning with the letter "C" are located at Central Justice Center, 700 Civic Center Drive West, Santa Ana, California 92701.
      - (b) Departments beginning with the letter "L" are located at Lamoreaux Justice Center, 341 The City Drive, Orange, California 92868.
2. Ex parte family law discovery motions are governed by rule 3.1203(a) of the California Rules of Court.

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name &amp; Address</i> ):  TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR ( <i>Name</i> ): _____ BAR NO.: _____	<i>FOR COURT USE ONLY</i>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b> JUSTICE CENTER: <input type="checkbox"/> Central - 700 Civic Center Dr. West, Santa Ana, CA 92701-4045 <input type="checkbox"/> Lamoreaux - 341 The City Drive, Orange, CA 92868-3205	
PLAINTIFF/PETITIONER:  DEFENDANT/RESPONDENT:	
<b>FAMILY LAW NOTICE RE RELATED CASE</b>	CASE NUMBER: _____

The parties must file this form with the Superior Court of Orange County, when a family law case is filed with the Court and when a party discovers that there is a related case. **A related case means one or both parties and/or minor children of the parties are involved in other cases.** Examples of related cases include another family law case, a domestic violence case, a child support collection case, a criminal case, and a juvenile case involving a minor child of one or both of the parties.

Fill in the requested information:

1. I also used the name(s): \_\_\_\_\_  
 \_\_\_\_\_

2. The other party's name is: \_\_\_\_\_;  
 He/She has also used the name(s): \_\_\_\_\_  
 \_\_\_\_\_

3.  Other court cases involving either party or a child of either party:  
 (If known, please include the case numbers)

	Case Number	Case Name	Court Location/ Justice Center	Person Involved
a.				
b.				
c.				
d.				

4.  There are no other court cases involving either party or a child of either party.

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

\_\_\_\_\_  
 (TYPE OR PRINT NAME OF PARTY OR ATTORNEY)

\_\_\_\_\_  
 (SIGNATURE OF PARTY OR ATTORNEY)

*Clerk stamps date here when form is filed.***TO THE WIRELESS SERVICE PROVIDER:** This order is made under California Family Code section 6347.**THE ORDER APPLIES TO:**

- ① Wireless service provider (*name*): \_\_\_\_\_
- ② Current account holder (*name*): \_\_\_\_\_  
Billing telephone number: \_\_\_\_\_
- ③ New account holder (*name*): \_\_\_\_\_
- ④ Transfer of the following wireless phone number(s):  
Telephone number (*include area code*): \_\_\_\_\_  
Telephone number (*include area code*): \_\_\_\_\_
- Check box to include attachment with additional telephone number(s).

*Fill in court name and street address:*

**Superior Court of California, County of Orange**  
341 The City Drive South  
Orange, CA 92868  
  
Lamoreaux Justice Center

*Fills in case number:***Case Number:****⑤ TRANSFER OF RIGHTS AND RESPONSIBILITIES**

All rights and responsibilities for the accounts listed in ④, including all financial responsibility for the telephone numbers, monthly service costs, and costs for any mobile device associated with the telephone numbers, must be immediately transferred to the new account holder (person in ③).

The person in ③ will be financially responsible for the accounts listed in ④ starting:

- the date the account is transferred by the wireless service provider
- (*specify date*) \_\_\_\_\_

- ⑥ The person in ③ must send this order and a completed copy of [form DV-901](#) to the wireless service provider listed in ①. For information on where to send this form and Form DV-901, go to the following website: <http://www.sos.ca.gov/registries/safe-home/domestic-violence-wireless-plans>. Form DV-901 is a confidential form and must NOT be filed with the court.

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

\_\_\_\_\_  
*Judicial Officer***ATTENTION WIRELESS SERVICE PROVIDER**

The new account holder's (person in ③) contact information, including information on form DV-901, must NOT be disclosed to the current account holder (person in ②).

This order is made under California's Domestic Violence Prevention Act.

**This is a Court Order.**

Your name: \_\_\_\_\_

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

**ATTACHMENT TO  
ORDER TRANSFERRING WIRELESS PHONE ACCOUNT (Form DV-900)**

**Confidential Information**

**DO NOT FILE THIS FORM WITH THE COURT.  
DO NOT PLACE IN THE COURT FILE.**

**ATTENTION PROTECTED PERSON:** This form should not be filed with the court. Complete this form and send it to the wireless service provider (*service provider*), along with a copy of the order (Form DV-900).

**To be completed by Protected Person:**

- ① The service provider is (*name of company*): \_\_\_\_\_
- ② The current account holder (*name of restrained person*): \_\_\_\_\_
- ③ The new account holder (*your name*): \_\_\_\_\_  
Your contact information (*This information will be used by the service provider only. The service provider will use this information to contact you to set up your account*):
  - a. The best phone number to reach you at is (*list a phone number that is not controlled by the restrained person*): \_\_\_\_\_
  - b. Another phone number to reach you at is (*list a phone number that is not controlled by the restrained person*): \_\_\_\_\_
  - c. E-mail address: \_\_\_\_\_
  - d. Mailing address: \_\_\_\_\_

**WHERE SHOULD I SEND FORM DV-900 AND THIS FORM (DV-901)?**

To find out where to send these forms, go to the California Secretary of State's website at <http://www.sos.ca.gov/registries/safe-home/domestic-violence-wireless-plans> OR check at <http://www.courts.ca.gov/selfhelp-domesticviolence.htm> and search for your service provider. You will be able to send the forms by mail, e-mail, or fax, depending on the service provider. The account(s) CANNOT be transferred to you if you do not send these forms to the service provider.

**ATTENTION WIRELESS SERVICE PROVIDER**

Under the Domestic Violence Prevention Act, California Family Code section 6347, the information contained on this form is **CONFIDENTIAL** and must not be disclosed to the Restrained Person (*listed in ②*).

**INSTRUCTIONS FOR WIRELESS SERVICE PROVIDER**

The orders contained on page 1 of this form must be followed unless the wireless service provider cannot operationally or technically effectuate the order due to certain circumstances, including, but not limited to, any of the following:

- When the current account holder has already terminated the account
- When differences in network technology prevent the functionality of a device on the network
- When there are geographic or other limitations on network or service availability

If the provider determines that transfer CANNOT occur, then the provider MUST notify the person in ③ within 72 hours of receipt of this order (California Family Code section 6347).

*(Clerk will fill out this part.)*

**—Clerk's Certificate—**

*Clerk's Certificate  
[seal]*

I certify that this order is a true and correct copy of the original on file in the court.

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

**This is a Court Order.**



## 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.

**What is a Domestic Violence Restraining Order?**

It is a court order that can help protect people who have been abused or threatened with abuse.

Abuse can be physical or emotional. It can be spoken or written.

**What does the order do?**

The court can order you to:

- Not contact or harm the protected person, including children or others listed as protected people
- Stay away from all protected people
- Not have any guns or ammunition
- Move out of the place that you share with the protected person
- Follow custody and visitation orders
- Pay child support
- Pay spousal support
- Obey property orders
- Follow other types of orders (listed on *Form DV-100*)

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

The person requesting the order must have a relationship with you:

- Someone you date or used to date
- Married, registered domestic partners, separated, engaged, or divorced
- Someone you live or lived with (more than just a roommate)
- A parent, grandparent, sibling, child, or grandchild related by blood, marriage, or adoption

**I've been served with a request for domestic violence restraining order. What do I do now?**

Read the papers very carefully. You must follow all the orders the judge made. The *Notice of Court Hearing* tells you when to appear in court. You should go to the hearing, if you do not agree to the orders requested. If you do not go to the hearing, the judge can make orders against you without hearing from you.

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

The police can arrest you. You can go to jail and pay a fine. You must still follow the orders even if you are not a U.S. citizen. If you are worried about your immigration status, talk to an immigration lawyer.

**How long does the order last?**

If there is a *Temporary Restraining Order* in effect, it will last until the hearing date. At the hearing, the judge will decide whether to extend the order or cancel the order. The judge can extend the order for up to five years. Custody, visitation, child support, and spousal support orders can last longer than five years and they do not end when the restraining order ends.

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

You still must obey the orders until the hearing. If you do NOT agree with the orders the person is asking for, fill out [Form DV-120, Response to Request for Domestic Violence Restraining Order](#). After you fill out the form, file it with the court clerk and “serve” the form on the person asking for the restraining order. “Serve” means to have someone 18 years or older—**not you**—mail a copy to the other party. The person who serves your form must fill out [Form DV-250, Proof of Service by Mail](#). After Form DV-250 is completed, make sure it is filed with the court clerk. You will also have a chance at the hearing to tell your side of the story. For more information on how to prepare for the hearing, read [Form DV-520-INFO, Get Ready for the Restraining Order Court Hearing](#).

**Is there a cost to file my Response (Form DV-120)?**

No.

**What if I also have criminal charges against me?**

See a lawyer. Anything you say or write, including in this case, can be used against you in your criminal case.



## **DV-120-INFO** How Can I Respond to a Request for Domestic Violence Restraining Order?

### **What if I have a gun or ammunition?**

If a restraining order is issued, 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. You must also prove to the court that you turned in or sold your gun. Read [Form DV-800-INFO](#), *How Do I Turn In, Sell, or Store My Firearms?*, for more information.

### **Do I need a lawyer?**

You are not entitled to a free court-appointed lawyer for this case but having a lawyer represent you or getting legal advice from a lawyer is a good idea, especially if you have children. If you cannot afford a lawyer, you can represent yourself. There is free or low-cost help available in every county. For help, ask the court clerk how to find free or low-cost legal services and self-help centers in your area. You can also get free help with child support at your local family law facilitator's office.

### **What if I do not speak English?**

When you file [Form DV-120](#), ask the court clerk if a court interpreter is available for your hearing. If an interpreter is not available, bring someone to interpret for you. Do NOT ask a child, a witness, or anyone to be protected by the order to interpret for you.

### **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 proceeding. Contact the clerks' 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.)

### **Can I use the restraining order to get divorced or terminate a domestic partnership?**

No. These forms will not end your marriage or registered domestic partnership. You must file other forms to end your marriage or registered domestic partnership.

### **What if I have children with the other person?**

The judge can make temporary orders for child custody and visitation. If the judge makes a temporary order for child custody, the parent with custody may not remove the child from California before notice to the other parent and a court hearing. Read the order for any other restrictions. There may be some exceptions. Ask a lawyer for more information.

### **What if I want to leave the county or state?**

You must still comply with the restraining order, including custody and visitation orders. The restraining order is valid anywhere in the United States.

### **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. Any temporary restraining order made by the court is in effect until the end of the hearing.

### **What if I need a restraining order against the other person?**

Do not use this form to request a domestic violence restraining order. For information on how to file your own restraining order, read [Form DV-505-INFO](#). You can also ask the court clerk about free or low-cost legal help.

### **What if I am a victim of domestic violence?**

For a referral to a local domestic violence or legal assistance program, call the National Domestic Violence Hotline:

**1-800-799-7233**

**TDD: 1-800-787-3224**

It's free and private.

They can help you in more than 100 languages.

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

[Local information may be inserted]

Clerk stamps date here when form is filed.

1 Name of Person Asking for Protection:

(See Form DV-100, item 1):

2 Your Name:

Your lawyer in this case (if you have one):

Name: State Bar No.:

Firm Name:

Address (If you have a lawyer for this case, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, give a different mailing address instead. You do not have to give your 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 Orange
341 The City Drive
Orange, CA 92868
Lamoreaux Justice Center

Fill in case number:

Case Number:

3 Use this form to respond to the Request for Domestic Violence Restraining Order (Form DV-100).

- Fill out this form and take it to the court clerk.
Have the person in 1 served by mail with a copy of this form and any attached pages.
For more information, read Form DV-120-INFO, How Can I Respond to a Request for Domestic Violence Restraining Order?
This form is for a response to a restraining order request. For more information about how to request your own restraining order, read Form DV-505-INFO and Form DV-120-INFO (see the section called "What if I need a restraining order against the other person?")

The judge will consider your Response at the hearing.

Write your hearing date, time, and place from Form DV-109, Notice of Court Hearing, item 3, here:

Hearing Date -> Date: Time: Dept.: Room:

You must obey the orders in Form DV-110, Temporary Restraining Order, until the hearing. At the hearing, the court may make restraining orders against you that could last up to five years and could be renewed.

4 Relationship to Person Asking for Protection

- I agree to the relationship listed in item 4 on Form DV-100.
I do not agree that the other party and I have or had the relationship listed in item 4 on Form DV-100 because:

5 Other Protected People

- I agree to the order requested.
I do not agree to the order requested, but I would agree to:

(Specify your reasons in item 25, page 5, of this form.)

This is not a Court Order.



**6**  **Personal Conduct Orders**

- a.  I agree to the orders requested.  
b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
(Specify your reasons in item 25, page 5, of this form.)

**7**  **Stay-Away Order**

- a.  I agree to the order requested.  
b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
(Specify your reasons in item 25, page 5, of this form.)

**8**  **Move-Out Order**

- a.  I agree to the order requested.  
b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
(Specify your reasons in item 25, page 5, of this form.)

**9**  **Guns or Other Firearms or Ammunition**

*If you were served with Form DV-110, Temporary Restraining Order, you must turn in any guns or firearms in your immediate possession or control. You must file a receipt with the court from a law enforcement agency or a licensed gun dealer within 48 hours after you received Form DV-110.*

- a.  I do not own or have any guns or firearms.  
b.  I ask for an exemption from the firearms prohibition under Family Code section 6389(h) because (specify): \_\_\_\_\_  
c.  I have turned in my guns and firearms to law enforcement or sold them to, or stored them with, a licensed gun dealer. A copy of the receipt showing that I turned in, sold, or stored my firearms (check all that apply):  
 is attached     has already been filed with the court.

**10**  **Record Unlawful Communications**

- a.  I agree to the order requested.  
b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
(Specify your reasons in item 25, page 5, of this form.)

**11**  **Care of Animals**

- a.  I agree to the order requested.  
b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
(Specify your reasons in item 25, page 5, of this form.)

**This is not a Court Order.**



- 12**  **Child Custody and Visitation**
- a.  I agree to the order requested.
- b.  I do not agree to the order requested. *(Specify your reasons in item 25, page 5, of this form.)*
- c.  I am not the parent of the child listed in Form DV-105, *Request for Child Custody and Visitation Orders*.
- d.  I ask for the following custody order *(specify)*: \_\_\_\_\_

- e.  I do  I do not agree to the orders requested to limit the child's travel as listed in Form DV-108, *Request for Order: No Travel with Children*.

*You and the other parent may tell the court that you want to be legal parents of the children (use Form DV-180, Agreement and Judgment of Parentage).*

- 13**  **Child Support** *(Check all that apply):*
- a.  I agree to the order requested.
- b.  I do not agree to the order requested. *(Specify your reasons in item 25, page 5, of this form.)*
- c.  I agree to pay guideline child support.

*Whether or not you agree to pay support, you must fill out, serve, and file [Form FL-150](#), Income and Expense Declaration, or [Form FL-155](#), Financial Statement (Simplified).*

- 14**  **Property Control**
- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_
- (Specify your reasons in item 25, page 5, of this form.)*

- 15**  **Debt Payment**
- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_
- (Specify your reasons in item 25, page 5, of this form.)*

- 16**  **Property Restraint**
- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_
- (Specify your reasons in item 25, page 5, of this form.)*

- 17**  **Spousal Support**
- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_
- (Specify your reasons in item 25, page 5, of this form.)*

*Whether or not you agree, you must fill out, serve, and file [Form FL-150](#), Income and Expense Declaration.*

**This is not a Court Order.**



**18**  **Rights to Mobile Device and Wireless Phone Account**

- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
*(Specify your reasons in item 25, page 5, of this form.)*

**19**  **Insurance**

- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
*(Specify your reasons in item 25, page 5, of this form.)*

**20**  **Lawyer's Fees and Costs**

- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
*(Specify your reasons in item 25, page 5, of this form.)*

- c.  I request the court to order payment of my lawyer's fees and costs.

*Whether or not you agree, you must fill out, serve, and file [Form FL-150](#), Income and Expense Declaration.*

**21**  **Payments for Costs and Services**

- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
*(Specify your reasons in item 25, page 5, of this form.)*

**22**  **Batterer Intervention Program**

- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
*(Specify your reasons in item 25, page 5, of this form.)*

**23**  **Other Orders** *(see item 22 on Form DV-100)*

- a.  I agree to the order requested.
- b.  I do not agree to the order requested,  but I would agree to: \_\_\_\_\_

\_\_\_\_\_  
*(Specify your reasons in item 25, page 5, of this form.)*

**24**  **Out-of-Pocket Expenses**

I ask the court to order payment of my out-of-pocket expenses because the temporary restraining order was issued without enough supporting facts. The expenses are:

Item: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Item: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

*You must fill out, serve, and file [Form FL-150](#), Income and Expense Declaration.*

**This is not a Court Order.**





Clerk stamps date here when form is filed.

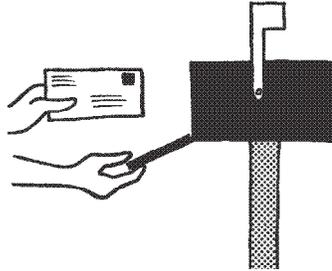
**1 Name of Person Asking for Protection:**  
\_\_\_\_\_

**2 Name of Person to Be Restrained:**  
\_\_\_\_\_

**3 Notice to Server**

The server must:

- Be 18 years of age or over.
- Not be listed in items **1** or **2** or **3** of form DV-100, *Request for Domestic Violence Restraining Order*.
- Mail a copy of all documents checked in **4** to the person in **5**.



Fill in court name and street address:

**Superior Court of California, County of**  
\_\_\_\_\_

Fill in case number:

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

**4** I (the server) am 18 years of age or over and live in or am employed in the county where the mailing took place. I mailed a copy of all documents checked below to the person in **5**:

- a.  DV-112, *Waiver of Hearing on Denied Request for Temporary Restraining Order*
- b.  DV-120, *Response to Request for Domestic Violence Restraining Order*
- c.  FL-150, *Income and Expense Declaration*
- d.  FL-155, *Simplified Financial Statement*
- e.  DV-130, *Restraining Order After Hearing (Order of Protection)*
- f.  Other (*specify*): \_\_\_\_\_

**Note: You cannot serve DV-100, DV-105, DV-109, or DV-110 by mail.**

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

- a. Name of person served: \_\_\_\_\_
- b. To this address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- c. Mailed on (*date*): \_\_\_\_\_
- d. 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: \_\_\_\_\_

**7** 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*

**1 What is a firearm?**

A firearm is a

- Handgun
- Shotgun
- Rifle
- Assault Weapon

**2 If you own or have a firearm, you must:**

- Turn it in to local law enforcement, *or*
- Sell it to, or store it with, a licensed gun dealer.

**3 How do I sell or store my firearm?**

Find a licensed gun dealer in your area.

Look under “Firearms Dealers” in your local Yellow Pages or on the Internet. Make sure the dealer is licensed.

**4 How do I take my firearm to law enforcement?**

Call your local law enforcement agency to ask about their procedures. Take a copy of the restraining order with you. Go directly to the law enforcement agency. Do not go anywhere else with firearms in your vehicle!

**5 If I turn my firearm in to law enforcement, how long will they keep it?**

Ask the law enforcement agency.

**6 After I give my firearm to law enforcement, can I change my mind?**

Yes. You are allowed to make one sale through a licensed gun dealer. To do this, a licensed gun dealer must present a bill of sale to your local law enforcement agency. The law enforcement agency will give the licensed gun dealer the firearm you are selling.

**7 Do I have to pay the law enforcement agency to keep my firearm?**

You may have to pay the agency for keeping your firearm. Contact your local law enforcement agency and ask if a fee is charged. The agency will tell you how much you need to pay.

**8 Questions?**

Call your local law enforcement agency:  
*[insert local information here]*

**DO:**

- unload your firearm.
- put your firearm in the trunk.
- call ahead to the law enforcement agency.

**DO NOT:**

- bring a loaded firearm to the law enforcement agency.
- bring ammunition with the firearm when you turn it in.
- put your firearm in a locked glove compartment.
- bring a firearm to court.

Clerk stamps date here when form is filed.

Empty box for clerk stamping date.

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 Protected Person**

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

**2 Restrained Person**

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: \_\_\_\_\_

**3 To the Restrained Person:**

If the court has ordered you to turn in, sell, or store your firearms, you may use this form to prove to the court that you have obeyed its orders. When you deliver your unloaded weapons, ask the law enforcement officer or the licensed gun dealer to complete item 4 or 5 and item 6. After the form is signed, file it with the court clerk. Keep a copy for yourself. For help, read Form DV-800-INFO/JV-252-INFO, How Do I Turn In, Sell, or Store My Firearms?

**4 To Law Enforcement**

Fill out items 4 and 6 of this form. Keep a copy and give the original to the person who turned in the firearms.

The firearms listed in 6 were turned in on:

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

To: \_\_\_\_\_  
Name and title of law enforcement agent

\_\_\_\_\_  
Name of law enforcement agency

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Signature of law enforcement agent

**5 To Licensed Gun Dealer**

Fill out items 5 and 6 of this form. Keep a copy and give the original to the person who sold you the firearms or stored them with you.

The firearms listed in 6 were

sold to me  transferred to me for storage on:

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

To: \_\_\_\_\_  
Name of licensed gun dealer

\_\_\_\_\_  
License number Telephone

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Signature of law enforcement agent



**6** Firearms

	<u>Make</u>	<u>Model</u>	<u>Serial Number</u>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____
e.	_____	_____	_____

Check here if you turned in, sold, or stored more firearms. Attach a sheet of paper and write "DV-800/JV-252, Item 6—Firearms Turned In, Sold, or Stored" for a title. Include make, model, and serial number of each firearm. You may use Form MC-025, Attachment.

**7** Do you have, own, possess, or control any other firearms besides the firearms listed in **6**?  Yes  No

If you answered yes, have you turned in, sold, or stored those other firearms?  Yes  No

If yes, check one of the boxes below:

a.  I filed a *Proof of Firearms Turned In, Sold, or Stored* for those firearms with the court on (date):

b.  I am filing the proof for those firearms along with this proof.

c.  I have not yet filed the proof for the other firearms. (explain why not):

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

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

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 your name

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