

Clerk stamps date here when form is filed.

1 Name of the person to be protected:

Address of the person (Skip this if you have a lawyer. If you want your address to be private, give a mailing address instead):

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

Person's telephone number (optional): (\_\_\_\_) \_\_\_\_\_

Person's lawyer (if you have one): (Name, address, telephone number, and State Bar number): \_\_\_\_\_

Fill in court name and street address:

**Superior Court of California, County of**

Court fills in case number when form is filed.

**Case Number:**

2 Name of the person you want protection from:

Describe the person: Sex:  M  F Weight: \_\_\_\_\_

Height: \_\_\_\_\_ Race: \_\_\_\_\_ Hair color: \_\_\_\_\_

Eye color: \_\_\_\_\_ Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Home address (if you know): \_\_\_\_\_

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

Work address (if you know): \_\_\_\_\_

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

3 Are you asking for protection for any other family or household members or the conservator of the person in 1? If "yes," list those persons:

Name	Sex	Age	Lives with you?	How are they related to you?
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Check here if there are more persons. Attach a sheet of paper and write "EA-100, item 3—Additional Protected Persons" for a title.

4 If you are asking for protection for any other family or household members or the conservator, why do they need protection?

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

Check here if you need more space for your answer. Attach a sheet of paper and write "EA-100, item 4—Why Others Need Protection" for a title.

**This is not a Court Order.**



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

**5** Who is asking the court for protection?  
 You, to protect yourself.  
 A person acting on your behalf: Name: \_\_\_\_\_  
 A conservator      Another person with legal authority to represent you.  
*If you are requesting protection for yourself, indicate that and go on to 6. If someone else is making this request, that person must attach a statement of who he or she is, his or her legal authority to make this request, and information about this representation, including any court appointments, the case numbers, and other relevant matters. Attach a sheet of paper and write "EA-100, item 5—Information About Person Requesting Orders" for a title.*

**6** Describe the person to be protected:  
 a. Age: \_\_\_\_\_  
 b. If you are under age 65, do you have any physical or mental limitations that prevent you from carrying out normal activities or protecting your rights?  Yes  No *(If yes, describe):* \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 *Check here if you need more space. Attach a sheet of paper and write "EA-100, item 6—Describe Protected Person" for a title.*

**7** How do you know the person in 2? *(Describe):*  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**8** Why are you filing in this court? *(Check all that apply):*  
 I was abused physically or emotionally in this county by the person in 2.  
 The person in 2 lives in this county.  
 Other *(explain):* \_\_\_\_\_

**9** a. Have you or any of the persons named in 3 and the person in 2 been involved in another court case?  
 Yes  No  
 If yes, where? County: \_\_\_\_\_ State: \_\_\_\_\_  
 What is the case number? *(If you know):* \_\_\_\_\_  
 What kind of case? *(Check all that apply):*  
 Elder abuse                       Dependent adult abuse                       Civil harassment  
 Domestic violence                       Criminal  
 Other *(specify):* \_\_\_\_\_

b. Are there now any protective or restraining orders relating to you or any of the persons in 3 and the person in 2?  
 Yes  No *If yes, attach a copy if you have one.*  
 *Check here if you need more space. Attach a sheet of paper and write "EA-100, item 9—Describe Other Cases" for a title.*

**This is not a Court Order.**

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

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

10 Is this your first request for a protective order against the person in 2?  Yes  No

If no, are you asking for the renewal of an earlier protective order?  Yes  No

If you are asking for the renewal of an earlier order, provide the following information:

a. What was the case number of the earlier order? \_\_\_\_\_

b. How long do you want the renewed order to last?  \_\_\_\_\_ years  permanently

11 Describe in a. through i. how the person in 2 has abused you.

a. When was the most recent abuse (provide date or estimated date): \_\_\_\_\_

b. Who was there? \_\_\_\_\_

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

c. In the most recent abuse, did the person in 2 do any of the following to you: physically abuse, financially abuse, intimidate, molest, attack, assault (sexually or otherwise), hit, follow, stalk, threaten, harass, destroy personal property, keep under surveillance, block movements, or contact you (directly or indirectly) by telephone, mail, e-mail, messenger, or by any other means?

Yes  No

If yes, describe: \_\_\_\_\_

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

d. Has the person in 2 previously abused you?  Yes  No

If yes, describe: \_\_\_\_\_

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

e. Describe any use or threatened use of guns or other weapons: \_\_\_\_\_

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

f. Did the police come?  Yes  No

If yes, did they give you an Emergency Protective Order?  Yes  No  I don't know

Attach a copy, if you have one.

**This is not a Court Order.**



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

11 g. Is the person in 2 a caregiver who didn't allow you to have goods or services you needed to avoid physical harm or mental suffering?  Yes  No

If yes, describe how that affected you: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

h. Did the case involve solely financial abuse unaccompanied by force, threat, harassment, intimidation, or any other form of abuse?

- Yes, only financial abuse.
- No, it included other abuse described above.

i. Describe any injuries or harm you suffered as a result of the actions or deprivation described above:

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

Check here if you need more space to explain any of the subparts in item 11. Attach a sheet of paper and write "EA-100, item 11, subpart \_\_\_—Describe Abuse" for a title.

**Check the orders you want**

12  **Personal Conduct Orders**

I ask the court to order the person in 2 to not do the following things to me:

- a.  Physically abuse, financially abuse, intimidate, molest, attack, assault (sexually or otherwise), hit, follow, stalk, threaten, harass, destroy my personal property, keep me under surveillance, or block my movements.
- b.  Contact (either directly or indirectly), or telephone, or send messages or mail or e-mail.

The person in 2 will be ordered not to take any action to get the addresses or locations of any protected person, or of that person's family members or caretakers, unless the court finds good cause not to make the order.

13  **Stay-Away Orders**

I ask the court to order the person in 2 to stay at least (specify): \_\_\_\_\_ yards away from me and the places listed below (check all that apply):

- a.  My home
- b.  My job or workplace
- c.  My vehicle
- d.  Each person listed in 3
- e.  Other (specify): \_\_\_\_\_

If the court orders the person in 2 to stay away from all the places checked above, will that person be able to get to his or her home or job?  Yes  No

If no, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This is not a Court Order.**



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

**Check the orders you want  (continued)****14**  **Move-Out Order**I ask the court to order the person in **(2)** to move out from and not return to my residence at (*address*):  
\_\_\_\_\_I will suffer physical or emotional harm if the person in **(2)** does not leave the residence.  
\_\_\_\_\_The title or lease to the residence is not in the sole name of the person in **(2)** or the name of the person in **(2)** and another person.  
\_\_\_\_\_ I ask for this move-out order right away to last until the hearing, because:a. I have the right to live at the above residence (*explain*): \_\_\_\_\_  
\_\_\_\_\_b. The person in **(2)** assaulted or threatened me.  
\_\_\_\_\_**15**  **Order About Guns or Other Firearms**I ask the court to order the person in **(2)** to be prohibited from owning, possessing, purchasing, or receiving, or attempting to purchase or receive, firearms **and** to sell or turn in any guns or firearms that he or she controls.The abuse in this case is **not solely financial abuse** unaccompanied by force, threat, harassment, intimidation, or any other form of abuse.  
\_\_\_\_\_**16**  **Other Orders**What other orders are you asking for? (*Describe*): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ *Check here if you need more space. Attach a sheet of paper and write "EA-100, item 16—Other Orders" for a title.***17**  **Temporary Orders**Do you want the court to make orders right now on matters listed in **(12)** through **(16)**?  Yes  No*If yes, explain why:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ *Check here if you need more space. Attach a sheet of paper and write "EA-100, item 17—Temporary Orders" for a title.***18** **Delivery of Orders to Law Enforcement Agencies**I request that copies of the court's orders be given by (*check one*): The court clerk  Myself  My lawyer to the following law enforcement agencies:

Name of Agency: \_\_\_\_\_

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

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

 *Check here if there are more law enforcement agencies. Attach a sheet of paper and write "EA-100, item 18—Law Enforcement Agencies" for a title.***This is not a Court Order.**

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

**19**  **Request to Shorten Time for Service**

You must have your papers personally served on the person in **2** at least 5 days before the hearing, unless the court orders a different time for service. (*Form EA-142-INFO, What Is "Proof of Service"?, explains how to serve (notify) the person in 2. Form EA-140 may be used to show the court that the papers have been served.*) If your papers cannot be served at least 5 days before the hearing and you need more time, explain why:

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

**20** **No Fee to Serve Orders**

If you want the sheriff or marshal to serve the orders on the person in **2** for free, ask the court clerk what you need to do.

**21**  **Lawyer's Fees and Court Costs**

I ask the court to order payment of my:

- a.  Lawyer's fees
- b.  Court costs

The amounts requested are:

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

Check here if you need more space. Attach a sheet of paper and write "EA-100, item 21—Lawyer's Fees and Court Costs" for a title.

**22** **Additional Relief**

I ask the court for additional relief as may be proper.

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

**This Request for Orders to Stop Elder or Dependent Adult Abuse must be personally served on the person in 2. Persons requesting the orders may not serve these papers.**

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

\_\_\_\_\_  
*Lawyer's name*

▶ \_\_\_\_\_  
*Lawyer's signature*

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

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

\_\_\_\_\_  
*Name of person filing this request*

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

**This is not a Court Order.**