

Clerk stamps date here when form is filed.

1 Name of person who asked for the protective orders:

\_\_\_\_\_

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

Your address (skip this if you have a lawyer): (If you want your address to be private, give a mailing address instead):

\_\_\_\_\_

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

Your telephone (optional): (\_\_\_\_) \_\_\_\_\_

Your 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**

Fill in case number:

**Case Number:**

**Use this form to give the court your responses to EA-100.**

- Read Form EA-151-INFO to protect your rights.
- Fill out this form and then take it to the court clerk.
- You must have the person in 1 served with a copy of this form and any attached pages.

3  **Personal Conduct Orders**

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested.
- c.  I agree to the following orders (specify):

\_\_\_\_\_

4  **Stay-Away Orders**

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested.
- c.  I agree to the following orders (specify):

\_\_\_\_\_

5  **Move-Out Order**

- a.  I agree to the order requested.
- b.  I do not agree to the order requested.
- c.  I agree to the following order (specify):

\_\_\_\_\_

6  **Turn In Guns or Other Firearms**

- a.  I do not own or have any guns or firearms.
- b.  I agree to the order requested.
- c.  I do not agree to the order requested.
- d.  I agree to the following order (specify):

\_\_\_\_\_

The court will consider your Response at the hearing. Write your hearing date and time here:

**Hearing Date** →

Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Dept.: \_\_\_\_\_ Room: \_\_\_\_\_

**You must obey the court's orders until the hearing.** If you do not come to this hearing, the court may make the orders requested against you last for up to 3 years.



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

**7**  **Other Orders**

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested.
- c.  I agree to the following orders (*specify*): \_\_\_\_\_

**8**  **The court should not make orders against me because** (*Give facts or reasons below*):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Check here if you need more space. Attach a sheet of paper and write "EA-110, Item 8—Facts and Reasons." Give specific facts and reasons.*

**9**  **Lawyer's Fees and Costs**

I ask the court to order payment of my:

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

because the temporary restraining order was issued without enough supporting facts.

The amounts requested are:

| Item  | Amount   | Item  | Amount   |
|-------|----------|-------|----------|
| _____ | \$ _____ | _____ | \$ _____ |
| _____ | \$ _____ | _____ | \$ _____ |
| _____ | \$ _____ | _____ | \$ _____ |

*Check here if you need more space. Attach a sheet of paper and write "EA-110, Item 9—Lawyer's Fees and Costs" at the top. Give specific items and amounts.*

**10**  **Other Relief**

I ask for additional relief as may be proper.

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

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: \_\_\_\_\_

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

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