 Name of person asking for protection: Your name: Notice to Server The server must: Be over 18 years of age. Not be listed on the restraining order. Mail a copy of all documents checked in (2) to the person in (2). PROOF OF SERVICE BY MAIL I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in (2). I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in (2). I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in (2). I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in (3) a copy of all documents checked below: a. □ Form EA-110, Response to Request for Orders to Stop Elder or Dependent Adult Abuse (cb. □ Other (specify): I placed copies of the documents checked above in a sealed envelope and mailed them as describerea. Mailed from (City):	
Notice to Server The server must: • Be a ver 18 years of age. • Not be listed on the restraining order. • Mail a copy of all documents checked in (a) to the person in (c). • Om over 18 years of age and am a resident or employed in the county where the mailing took place. • I am over 18 years of age and am a resident or employed in the county where the mailing took place. • I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in (c). • PROOF OF SERVICE BY MAIL • I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in (c) a copy of all documents checked below: a. □ Form EA-110, <i>Response to Request for Orders to Stop Elder or Dependent Adult Abuse</i> (c) b. □ Other (specify): I placed copies of the documents checked above in a sealed envelope and mailed them as described a. a. Mailed from (<i>City</i>):	
The server must: • Be over 18 years of age. • Not be listed on the restraining order. • Mail a copy of all documents checked in (4) to the person in (7). Complete and sign this form and give it to the person in (2). • PROOF OF SERVICE BY MAIL • I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in (1). Complete and sign this form and give it to the person in (2). • I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in (1). Complete and age and am a resident or employed in the county where the mailing took place the person in (2). • I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in (2). • I and over 18 years of age and am a resident or employed in the county where the mailing took place the person in (2). • I and over 18 years of age and am a resident or employed in the county where the mailing took place the person in (2). • I and over 18 years of age and am a resident or employed in the county where the mailing took place the person in (2). • I and over 18 years of age and am a resident or employed in the county where the mailing took place the person in (2). • I and over 18 years of age and am a resident or employed in the county where the mailing took place the person in (2). • I placed copies of the documents checked above in a sealed envelope and mailed them as described a. • Mailed from (<i>City</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): • L other (<i>State</i>): •	
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checked in ④ to the person in ①. Complete and sign this form and give it to the person in ②. PROOF OF SERVICE BY MAIL I am over 18 years of age and am a resident or employed in the county where the mailing took place the person in ④ a copy of all documents checked below: a. □ Form EA-110, Response to Request for Orders to Stop Elder or Dependent Adult Abuse (cob. □ Other (specify): I placed copies of the documents checked above in a sealed envelope and mailed them as described a. Mailed from (City):	
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c. To this Address:City:State:Zip:ZIP:	
City: State: Zip: Server's Information Name: Address:	
Server's Information Name: Address:	
City: State: Zip:	
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Telephone:	
(If you are a registered process server):	
County of registration: Registration number:	
declare under penalty of perjury under the laws of the State of California that the information above orrect.	
Pate:	
Server signs here	