

Clerk stamps date here when form is filed.

**1** Name of person asking for protection:

\_\_\_\_\_  
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 number (*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**

**2** Name of person to be restrained:

\_\_\_\_\_  
Description of that person:

Fill in case number:

**Case Number:**

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

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

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

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

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

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

**3** **Hearing**

There was a hearing:

on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_  a.m.  p.m. Dept.: \_\_\_\_\_ Rm: \_\_\_\_\_

\_\_\_\_\_ made the orders at the hearing.

(*Name of judicial officer*)

These people were at the hearing:

a.  The person in **1**. c.  Lawyer of the person in **1** (*name*): \_\_\_\_\_

b.  The person in **2**. d.  Lawyer of the person in **2** (*name*): \_\_\_\_\_

**4** **Expiration Date of Order**

This Order, except for an award of lawyer's fees, expires at:

(*time*): \_\_\_\_\_  a.m.  p.m. or  midnight on (*date*): \_\_\_\_\_

If no expiration date is written here, this Order expires three years from the date of issuance.

This renewal Order remains in effect permanently.

**This is a Court Order.**



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

### Orders Against the Restrained Person

(Write the name of the person in ②): \_\_\_\_\_

**5 This Is a Court Order**

To the person in ②: You must obey all the orders indicated below. If you do not obey these orders, you can be arrested and charged with a crime. You may have to go to jail, pay a fine of up to \$1,000, or both.

**6 Personal Conduct Orders**

You **must not** do the following things to the person listed in ① :

- a. Physically abuse, financially abuse, intimidate, molest, attack, assault (sexually or otherwise), hit, follow, stalk, threaten, harass, destroy personal property, keep under surveillance, or block movements.
- b. Contact (directly or indirectly), telephone, send messages, mail, or e-mail.
- c. Take any action to obtain the address or location of the person in ① or of that person's family or caretakers.

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.

**7 Stay-Away Orders**

You **must** stay at least (specify): \_\_\_\_\_ yards away from:

- a.  The person listed in ①
- b.  The home of the person in ①
- c.  Job or workplace of the person in ①
- d.  Vehicle of person in ①
- e.  Other (specify): \_\_\_\_\_

**8 Move-Out Order**

You must move out immediately from and not return to (address): \_\_\_\_\_

**9 No Guns or Other Firearms**

You cannot own, possess, have, buy or try to buy, receive or try to receive, or in any other way get a gun or firearm.

**10 Turn In or Sell Guns or Firearms**

You must:

- Sell to a licensed gun dealer or turn in to police any guns or firearms that you possess or control. This must be done within 24 hours of being served with this order.
- File a receipt with the court within 48 hours of receiving this order that proves guns have been turned in or sold. (You may use Form EA-145 for this.)

**11 Financial Abuse**

This case  does **not**  does involve **solely financial abuse** unaccompanied by force, threat, harassment, intimidation or any other form of abuse.

**12 Other Orders (specify):** \_\_\_\_\_

Additional orders are attached at the end of this Order.

**This is a Court Order.**



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

**Instructions for the Protected Person**

To the person in ① (Write the name of the person in ①): \_\_\_\_\_

13  **Delivery to Law Enforcement Agency**

If the court issues restraining orders, by the close of business on the date this Order is made, you or your attorney must deliver a copy of this Order and any proof of service forms to each law enforcement agency listed below:

Name of Law Enforcement Agency	Address (City, State, Zip)
_____	_____
_____	_____
_____	_____

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

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

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

\_\_\_\_\_  
*Judicial Officer*

**Warnings and Notices to the Restrained Person in 2**

**You Cannot Have Guns or Firearms**

If the court orders, you cannot own, have, possess, buy or try to buy, receive or try to receive, or otherwise get a gun while this Order is in effect. If you do, you can go to jail and pay a \$1,000 fine. You must sell to a licensed gun dealer or turn in to police any guns or firearms that you have or control in accordance with ⑩ above. The court will require proof that you did so. If you do not obey this Order, you can be charged with a crime.

**Instructions for Law Enforcement Agencies**

This Order is effective when made. It is enforceable anywhere in all 50 states, the District of Columbia, all tribal lands, and all U.S. territories and shall be enforced as if it were an Order of that jurisdiction 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 restraining order are subject to criminal penalties.

*(Clerk will fill out this part.)*

**Clerk's Certificate**

*Clerk's Certificate*  
*[seal]*

I certify that this *Order After Hearing Restraining Elder or Dependent Adult Abuse* is a true and correct copy of the original on file in the court.

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

**This is a Court Order.**