

Clerk stamps date here when form is filed.

Read *Can an Elder or Dependent Adult Abuse Restraining Order Help Me?* (form EA-100-INFO) before completing this form. Also fill out *Confidential CLETS Information* (form CLETS-001), with as much information as you know.

**1 Elder or Dependent Adult in Need of Protection**

a. Full Name: \_\_\_\_\_  
 Sex:  M  F Age: \_\_\_\_\_

**2 Person From Whom Protection Is Sought**

Full Name: \_\_\_\_\_  
 Address (if known): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Fill in court name and street address:

**Superior Court of California, County of**

**3 Person Requesting Order**

Who is asking the court for protection? (Check a, b, or c):

a.  The elder or dependent adult named in ①.  
 b.  Name: \_\_\_\_\_  
 conservator of the  person  estate  person and estate  
 of the person named in ①, appointed by (name of court): \_\_\_\_\_  
 Case No.: \_\_\_\_\_

Court fills in case number when form is filed.

**Case Number:**

c.  Other (name) \_\_\_\_\_

(Show this person's legal authority to make this request on an attached sheet of paper. Write "Attachment 3c—Information About Person Requesting Protective Order" for a title. You may use form MC-025, Attachment.)

**4 Contact Information**

Contact information for the person asking the court for protection:

a. 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. The person in ① does not have to give telephone, fax, or e-mail.):

Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

**This is not a Court Order.**

**5 Description of Protected Person**

Describe the person named in ①. (Check a or b):

- a.  Is age 65 or older and a resident of California.
- b.  Is a resident of California and an adult under age 65. This person has physical or mental limitations that restrict his or her ability to carry out normal activities or to protect his or her rights. (Briefly describe limitations on the attached sheet of paper or form MC-025. Write "Attachment 5—Description of Protected Person" for a title.)

**6 Additional Protected Persons**

a. Are you asking for protection for any other family or household members or for the conservator of the elder or dependent adult listed in ①?  Yes  No (If yes, list them):

| <u>Full Name</u> | <u>Sex</u> | <u>Age</u> | <u>Lives with you?</u>                                   | <u>How are they related to you?</u> |
|------------------|------------|------------|--|-------------------------------------|
| _____            | _____      | _____      | <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 "Attachment 6a—Additional Protected Persons" for a title. You may use form MC-025, Attachment.

b. Why do these people need protection? (Explain below):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 6b—Why Others Need Protection" for a title.

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

**7 Relationship of Parties**

How does the person in ① know the person in ②? (Explain below):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 7—Relationship of Parties" for a title.

\_\_\_\_\_

**8 Venue**

Why are you filing in this county? (Check all that apply):

- a.  The person in ② lives in this county.
- b.  The person in ① was abused by the person in ② in this county.
- c.  Other (specify): \_\_\_\_\_

**This is not a Court Order.**



**9 Other Court Cases**

a. Has the person in (1) or any of the persons named in (6) been involved in another court case with the person in (2)?  No  Yes (If yes, specify the kind of each case and indicate where and when each was filed):

| Kind of Case   | Filed in (County/State) | Year Filed | Case Number (if known) |
|--|-------------------------|------------|------------------------|
| (1) <input type="checkbox"/> Elder or Dependent Adult Abuse      | _____                   | _____      | _____                  |
| (2) <input type="checkbox"/> Civil Harassment                    | _____                   | _____      | _____                  |
| (3) <input type="checkbox"/> Domestic Violence                   | _____                   | _____      | _____                  |
| (4) <input type="checkbox"/> Divorce, Nullity, Legal Separation  | _____                   | _____      | _____                  |
| (5) <input type="checkbox"/> Paternity, Parentage, Child Custody | _____                   | _____      | _____                  |
| (6) <input type="checkbox"/> Eviction                            | _____                   | _____      | _____                  |
| (7) <input type="checkbox"/> Guardianship                        | _____                   | _____      | _____                  |
| (8) <input type="checkbox"/> Workplace Violence                  | _____                   | _____      | _____                  |
| (9) <input type="checkbox"/> Small Claims                        | _____                   | _____      | _____                  |
| (10) <input type="checkbox"/> Criminal                           | _____                   | _____      | _____                  |
| (11) <input type="checkbox"/> Other (specify):                   | _____                   | _____      | _____                  |

b. Are there now any protective or restraining orders in effect relating to the person in (1) or any of the persons named in (6) and the person in (2)?  No  Yes (If yes, attach a copy if you have one.)

**10 Description of Abuse**

a. Abuse means either:

- (1) Physical abuse, neglect, financial abuse, abandonment, isolation, abduction, or other treatment with resulting physical harm or pain or mental suffering; or
- (2) The withholding by a caretaker of goods or services that are necessary to avoid physical harm or mental suffering.

b. Tell the court about the last time the person in (2) abused the person in (1).

(1) When did it happen? (Provide date or estimated date): \_\_\_\_\_

(2) Who else was there?  
\_\_\_\_\_  
\_\_\_\_\_

(3) Describe what happened below.

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 10b(3)—Describe Abuse" for a title.

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

(4) Was the abuse **solely financial abuse** unaccompanied by force, threat, harassment, intimidation, or any other form of abuse?

Yes, only financial abuse.  No, the abuse included other forms of abuse described above.

**This is not a Court Order.**



(5) Did the person in ② use or threaten to use a gun or any other weapon?

Yes  No (If yes, explain below):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 10b(5)—Use of Weapons" for a title.

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

(6) Was the person in ① harmed or injured as a result of the acts of abuse described above?

Yes  No (If yes, explain below):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 10b(6)—Harm or Injury" for a title.

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

(7) Did the police come?  Yes  No

If yes, did they give the person in ① or the person in ② an Emergency Protective Order?  Yes  No

If yes, the order protects (check all that apply):

a.  The person in ① b.  The person in ② c.  The persons in ⑥

(Attach a copy of the order if you have one.)

c. Is the person in ② a care custodian who deprived the person in ① of (kept from him or her, did not allow him or her to have or receive, or did not provide him or her with) goods or services that the person needed to avoid physical harm or mental suffering?

Yes  No (If yes, describe below what the person was deprived of and how that affected him or her):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 10c—Deprivation by Care Custodian" for a title.

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

d. Has the person in ② abused the person in ① at other times?

Yes  No (If yes, describe prior incidents and provide dates below):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 10d—Previous Abuse" for a title.

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

**This is not a Court Order.**



**Check the orders you want.** p

**11**  **Personal Conduct Orders**

I ask the court to order the person in **2** **not** to do any of the following things to the person in **1** or to any person to be protected listed in **6**:

- a.  Physically abuse, financially abuse, intimidate, molest, attack, strike, stalk, threaten, assault (sexually or otherwise), hit, harass, destroy the personal property of, or disturb the peace of the person.
- b.  Contact the person, either directly or indirectly, in **any** way, including, but not limited to, in person, by telephone, in writing, by public or private mail, by interoffice mail, by e-mail, by text message, by fax, or by other electronic means.
- c.  Other (*specify*):  
 *Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 11c—Other Personal Conduct Orders," for a title.*

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

*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.*

**12**  **Stay-Away Orders**

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

- (1)  The elder or dependent adult in **1**
- (2)  The persons in **6**
- (3)  The home of the elder or dependent adult
- (4)  The job or workplace of the elder or dependent adult
- (5)  The vehicle of the elder or dependent adult
- (6)  Other (*specify*): \_\_\_\_\_

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

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

*Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 12b—Stay-Away Orders," for a title.*

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

**This is not a Court Order.**



**13**  **Move-Out Order**

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

The person in **(1)** will suffer physical or emotional harm if the person in **(2)** does not leave the residence. The person in **(2)** is not named in the title or lease of the residence, either alone or with others beside the person in **(1)**.

I ask for this move-out order right away to last until the hearing, because:

- a. The person in **(2)** assaulted or threatened the person in **(1)**; and
- b. The person in **(1)** has the right to live at the above residence. (*Explain below*):

*Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 13—My Right to Residence," for a title.*

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**14** **Guns or Other Firearms and Ammunition**

Does the person in **(2)** own or possess any guns or other firearms?  Yes  No  I don't know

*Unless the abuse is only financial, if the judge grants a protective order, the person in **(2)** will be prohibited from owning, possessing, purchasing, receiving, or attempting to purchase or receive a gun, other firearm, and ammunition while the protective order is in effect. The person in **(2)** will also be ordered to turn in to law enforcement, or sell to or store with a gun dealer, any guns or firearms within his or her immediate possession or control.*

**15** **Immediate Orders**

Do you want the court to make any of these orders now that will last until the hearing without notice to the person in **(2)**?  Yes  No (*If you answered yes, explain why below*):

*Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 15—Immediate Orders" for a title.*

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**16**  **Request to Give Less Than Five-Days' Notice**

*You must have your papers personally served on the person in **(2)** at least five days before the hearing, unless the court orders a shorter time for service. (Form EA-200-INFO explains What Is "Proof of Personal Service"? Form EA-200, Proof of Personal Service, may be used to show the court that the papers have been served.)*

If you want there to be fewer than five days between service and the hearing, explain why below:

*Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 16—Request to Give Less Than Five-Days' Notice" for a title.*

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**This is not a Court Order.**



**17** **No Fee to Serve Orders** *If you want the sheriff or marshal to serve (notify) the person in 2 about the orders for free, ask the court clerk what you need to do.*

**18**  **Lawyer's Fees and 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 there are more items. Put the items and amounts on the attached sheet of paper or form MC-025 and write "Attachment 18—Lawyer's Fees and Costs" for a title.*

**19**  **Possession and Protection of Animals**

I ask the court to order the following:

- a.  That the person in 1 be given the sole possession, care, and control of the animals listed below, which he/she owns, possesses, leases, keeps, or holds, or which reside in his/her household.  
*(Identify animals by, e.g., type, breed, name, color, sex.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I request sole possession of the animals because *(specify good cause for granting order)*:

*Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 19a—Possession of Animals" for a title.*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- b.  That 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 animals listed above.

**This is not a Court Order.**



**20**  **Additional Orders Requested**

I ask the court to make the following additional orders (*specify*):

*Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or form MC-025 and write "Attachment 20—Additional Orders Requested," for a title.*

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

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


\_\_\_\_\_  
*Lawyer's name (if any)*

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

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

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

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

 \_\_\_\_\_  
*Signature of person filling out this request*

**This is not a Court Order.**

