

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of

Court fills in case number when form is filed.

Case Number:

Use this form to respond to the *Petition* (Form WV-100)

- Read *How Can I Respond to a Petition for Workplace Violence Restraining Orders (Form WV-120-INFO)?*, to protect your rights.
- Fill out this form and take it to the court clerk.
- Have someone age 18 or older—not you—serve the petitioner or the petitioner’s lawyer by mail with a copy of this form and any attached pages. (*Use Form WV-250, Proof of Service of Response by Mail.*)

1 Petitioner (Employer)

Name: _____

2 Employee Seeking Protection

Full Name: _____

3 Respondent (Person From Whom Protection Is Sought)

a. Your Name: _____

Your Lawyer (*if you have one for this case*):

Name: _____ State Bar No.: _____

Firm Name: _____

b. Your Address (*you may give a mailing address if you want to keep your street address private; skip this if you have a lawyer*):

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-Mail Address: _____

4 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*): _____

5 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*): _____

The court will consider your response at the hearing. Write your hearing date, time, and place from Form WV-109, item ④ here:

Hearing Date Date: _____ Time: _____
 Dept.: _____ Room: _____

If you were served with a Temporary Restraining Order, you must obey it until the hearing. At the hearing, the court may make orders against you that last for up to three years.



6 **Additional Protected Persons**

- a. I agree that the persons listed in item **4** of the Petition may be protected by the order requested.
- b. I do not agree that the persons listed in item **4** of the Petition may be protected by the order requested.

7 **Firearms Prohibition and Relinquishment**

If you were served with Form WV-110, *Temporary Restraining Order*, you cannot own or possess any guns, other firearms, or ammunition. You must sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any guns or other firearms in your immediate possession or control within 24 hours of being served with Form WV-110. (See Item **8 of Form WV-110.) You must file a receipt with the court. You may use Form WV-800, *Proof of Firearms Turned In, Sold, or Stored* for the receipt.**

- a. I do not own or control any guns or other firearms.
- b. I have turned in my guns and firearms to the police or sold them to or stored them with a licensed gun dealer.
A copy of the receipt is attached. has already been filed with the court.

8 **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*): _____

9 **Denial**

I did not do anything described in item **8** of Form WV-100. (*Skip to **11** .*)

10 **Justification or Excuse**

If I did some or all of the things that the petitioner has accused me of, my actions were justified or excused for the following reasons (*explain*):

- Check here if there is not enough space below for your answer. Put your complete answer on an attached sheet of paper and write "WV-120, item 10—Justification or Excuse" for a title.*

11 **No Fee for Filing**

- a. I ask the court to waive the filing fee because the petitioner claims in Form WV-100 item **14** to be entitled to free filing.
- b. I request that I not be required to pay the filing fee because I am eligible for a fee waiver. (*Form FW-001, Request to Waive Court Fees, must be filed separately.*)

12 **Costs**

- a. I ask the court to order the petitioner to pay my 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 12—Costs" for a title.
- b. I ask the court to deny the request of the person asking for protection that I pay his or her lawyer's fees and costs.

13 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 is true and correct.

Date: _____

Type or print your name

 _____
Sign your name