

Court name and street address:

**Superior Court of California, County of**

**Case Number:**

The judge can consider your Answer at the hearing. Write your hearing date and time here:

Hearing Date

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

**You must obey the orders until the hearing.**  
If you do not come to this hearing, the judge can make the orders last for 3 years or longer.

**1** Name of person who asked for the order (protected person): \_\_\_\_\_

**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 phone # (*optional*): (\_\_\_\_\_) \_\_\_\_\_

Your lawyer (*if you have one*): (*Name, address, phone #, and State Bar #*):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Give the judge your answers to DV-100:

☐ **Personal Conduct Orders**

**3** I ☐ do ☐ do not agree to the order requested.

☐ **Stay-Away Order**

**4** I ☐ do ☐ do not agree to the order requested.

☐ **Move-Out Order**

**5** I ☐ do ☐ do not agree to the order requested.

☐ **Child Custody**

**6** a. I ☐ do ☐ do not agree to the custody order requested.

b. ☐ I am not the parent of the child listed in DV-105.

c. ☐ I ask for the following custody order (*specify*): \_\_\_\_\_  
\_\_\_\_\_

d. ☐ I ☐ do ☐ do not agree to the orders requested to prevent child abduction.

☐ **Visitation**

**7** a. I ☐ do ☐ do not agree to the visitation order requested.

b. ☐ I ask for the following visitation order (*specify*): \_\_\_\_\_  
\_\_\_\_\_

☐ **Child Support**

**8** a. I ☐ do ☐ do not agree to the order requested.

b. ☐ I agree to pay guideline child support.

*You must fill out, serve, and file Form FL-150 or FL-155.*

☐ **Record Unlawful Communications**

**9** I ☐ do ☐ do not agree to the order requested.

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

**10** ☐ **Property Control**I ☐ do ☐ do not agree to the order requested.*If you have other requests, list them in 19 below.***11** ☐ **Debt Payment**I ☐ do ☐ do not agree to the order requested.*If you have other requests, list them in 19 below.***12** ☐ **Property Restraint**I ☐ do ☐ do not agree to the order requested.*If you have other requests, list them in 19 below.***13** ☐ **Attorney Fees and Costs**I ☐ do ☐ do not agree to the order requested.**14** ☐ **Payments for Costs and Services**I ☐ do ☐ do not agree to the order requested.**15** ☐ **Batterer Intervention Program**I ☐ do ☐ do not agree to the order requested.**16** ☐ **Other Orders** (see Item 19 on Form DV-100)I ☐ do ☐ do not agree to the order requested.**17** ☐ **Turn in Guns or Other Firearms**a. ☐ I do not own or have any guns or firearms.b. ☐ I ☐ do ☐ do not agree to the order requested.c. ☐ I ☐ have ☐ have not turned in my guns to the police or a licensed gun dealer.d. ☐ A copy of the receipt ☐ is attached. ☐ has already been filed with the court.*You must file a receipt with the court within 72 hours after receiving DV-110.***18** ☐ **I ask the court to order payment of my**a. ☐ Attorney feesb. ☐ Out-of-pocket expenses because the temporary restraining order was issued without enough supporting facts. The expenses are:

Item: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Item: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

*You must fill out, serve, and file Form FL-150.***19** ☐ **My answer to the statements in DV-100 and other requests***Please attach your statement. Write "DV-120, Item 19 — More Information" at the top. Be specific.***20** 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*