

**Response to Request for Elder or Dependent Adult Restraining Order Allowing Contact**

Clerk stamps date here when form is filed.

**Use this form to respond to the Request (form EA-300)**

- Read *How Can I Respond to a Request for an Elder or Dependent Adult Restraining Order Allowing Contact?* (form EA-320-INFO) to protect your rights.
- Fill out this form and take it to the court clerk.
- Have someone age 18 or older—**not you or anybody else involved in the case**—serve the person or persons listed in ① by mail with a copy of this form and any attached pages. (*Use form EA-250, Proof of Service of Response by Mail.*)

Fill in court name and street address:

**Superior Court of California, County of**

Court fills in case number when form is filed.

**Case Number:**

**① Elders or Dependent Adults**

Names: \_\_\_\_\_  
\_\_\_\_\_

**② Person Alleged to Be Preventing Contact**

a. Your Name: \_\_\_\_\_  
 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. You do not have to give telephone, fax, or email.*)  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

Present your response and any opposition at the hearing. Write your hearing date, time, and place from form EA-309, item ⑤, here:

**Hearing Date** → Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Dept.: \_\_\_\_\_ Room: \_\_\_\_\_

At the hearing, the court may make an order against you that last for up to five years.

**③ Person Who Wants Contact With the Elders or Dependent Adults**

Name: \_\_\_\_\_

**④ Person Requesting Order**

Name: \_\_\_\_\_

**⑤  Order Allowing Contact**

- a.  I agree to the order requested.
- b.  I do not agree to the order requested. (*Specify why you disagree in items ⑦ and ⑧ on page 2.*)

**⑥  Denial**

I did not do anything I was accused of in item ⑧ of form EA-300. (*Skip to ⑧.*)





**9**  **Lawyer's Fees and Costs**

a.  I ask the court to order payment of my  lawyer's fees  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 and write "Attachment 9—Lawyer's Fees and Costs" for a title. You may use form MC-025, Attachment.

b.  I ask the court to deny the request of the person asking for the order named in **4** that I pay their lawyer's fees and costs.

**10** 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*

▶ \_\_\_\_\_  
*Sign your name*

