

Clerk stamps date here when form is filed.

Fill in court name and street address:  
**Superior Court of California, County of**

Fill in case number:  
**Case Number:**

**1 Protected Elder or Dependent Adult**

a. Full Name: \_\_\_\_\_

Person requesting protection for the elder or dependent adult, if different (*person named in item 3 of Form EA-100*):

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

Lawyer for person named above (*if any 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 e-mail.*):

Address: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**2 Restrained Person**

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

Address (*if known*): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**3 Hearing**

There was a hearing on (*date*): \_\_\_\_\_ at (*time*): \_\_\_\_\_  a.m.  p.m. Dept.: \_\_\_\_\_ Room: \_\_\_\_\_ (*Name of judicial officer*): \_\_\_\_\_ made the orders at the hearing.

These people were at the hearing:

a.  The protected person    c.  The lawyer for the protected person (*name*): \_\_\_\_\_

b.  The restrained person    d.  The lawyer for the restrained person (*name*): \_\_\_\_\_

Additional persons present are listed on Attachment 3.

**4 Renewal and Expiration**

The request to renew the attached *Elder or Dependent Adult Abuse Restraining Order After Hearing*, originally issued on (*date*) \_\_\_\_\_, is:

a.  **GRANTED.** The attached order is renewed and will now be in effect for:  
 5 years                       permanently (*the renewed restraining order must be attached to this form.*)

The attached order will expire on:  
(*date*): \_\_\_\_\_ (*time*): \_\_\_\_\_  a.m.  p.m. or  midnight

If no expiration date is written here, the order expires three years from the date of the hearing in item 3.

b.  **DENIED.** The attached order expires as stated in item 4 of the order.

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

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

**This is a Court Order.**