on in ① must complete items ① .② and ③ only. 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:	EA-110	Temp	orary Restraining Orde	er Clerk stamps date here when form is filed.
□ 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.: Fill in coun name and street address: Superior Court of California, Count fly 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: Restrained Person Full Name: Description: Sex: M Fill in coun name and street address: Superior Court of California, Count flis in case number when form is flied. Case Number: Case Number: Case Number: Case Number: Case Number: Age: Race: Home Address (if known): City: State: City: State: Zip: Relationship to Protected Person: Additional Protected Persons In addition to the elder or dependent adult named in ①, the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Persons In addition to the elder or dependent adult named in ②, the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Persons In additional Protected Persons. List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:	Protected	Elder or Dep	pendent Adult	
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: E-Mail Address: Restrained Person Full Name: Description: Sex: Home Address (if known): City: Relationship to Protected Person: Additional Protected Persons In addition to the elder or dependent adult named in 1, the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex: Age: Age: Age: Age: Relation to Protected Person: Additional Protected Person: Check here if there are additional Protected Persons: List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:	Person differe	requesting protent (person name	tection for the elder or dependent a ed in item \bigcirc of Form EA-100):	adult, if
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: Case Number: Telephone: Fax: E-Mail Address: Restrained Person Full Name: Description: Sex: M F Height: Weight: Date of Birth: Hair Color: Eye Color: Age: Race: Home Address (if known): City: State: Zip: State: Zip: Case Number: Bace: Home Address (if known): State: Zip: Relationship to Protected Person: Additional Protected Persons In addition to the elder or dependent adult named in 1, the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Person: No Check here if there are additional protected persons. List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:	•	or person named	above (if any, for this case):	Fill in court name and atract address:
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: Case Number: Telephone: Fax: E-Mail Address: Restrained Person Full Name: Description: Sex: M F Height: Weight: Date of Birth: Hair Color: Eye Color: Age: Race: Home Address (if known): City: State: Zip: Case Number: Beat Gase Number: Additional Protected Persons In addition to the elder or dependent adult named in (1), the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Persons No Check here if there are additional protected Persons. List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:	_		State Bai No	
City:State:Zip:Court fills in case number when form is filed. Telephone:Fax:	If you do r private, yo have to giv	not have a lawye ou may give a di	er and want to keep your home add fferent mailing address instead. Yo	ldress
Telephone: Fax: E-Mail Address: Restrained Person Full Name: Description: Sex: M F Height: Weight: Date of Birth: Hair Color: Eye Color: Age: Race: Home Address (if known): City: State: Zip: Relationship to Protected Person: Additional Protected Persons In addition to the elder or dependent adult named in 1 , the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Persons No Yes No Yes No Yes No Household Protected Persons: List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:			State: Zin:	
E-Mail Address: Restrained Person Full Name: Description: Sex: M F Height: Weight: Date of Birth: Hair Color: Eye Color: Age: Race: Home Address (if known): City: State: Zip: Relationship to Protected Person: Additional Protected Persons In addition to the elder or dependent adult named in (1), the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Persons Yes No Yes No Yes No Yes No Household Member Additional Protected Persons Additional Persons Addition	-			Case Number:
Restrained Person Full Name: Description: Sex: M F Height: Weight: Date of Birth: Hair Color: Eye Color: Age: Race: Home Address (if known): City: State: Zip: Relationship to Protected Person: Additional Protected Persons In addition to the elder or dependent adult named in 1, the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Persons The Check here if there are additional protected persons. List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:	_			
Home Address (if known): City: Relationship to Protected Person: Additional Protected Persons In addition to the elder or dependent adult named in 1, the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Persons No Yes No Yes No Check here if there are additional protected persons. List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:	Description:	Sex: \square M	<u></u>	
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Relationship to Protected Persons In addition to the elder or dependent adult named in 1, the following family or household members or conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Persons I was a little in the protected Persons. List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:				State: 7in:
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conservator of that person are protected by the temporary orders indicated below: Full Name Sex Age Household Member? Relation to Protected Persons I ves I No Yes No Check here if there are additional protected persons. List them on an attached sheet of paper and write "Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:		nal Protecte	d Persons	
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"Attachment 3—Additional Protected Persons" as a title. You may use Form MC-025, Attachment. Expiration Date This Order expires at the end of the hearing scheduled for the date and time below:	In addition to	o the elder or depot that person ar	pendent adult named in \bigcirc , the form \bigcirc protected by the temporary order	ers indicated below: <u>Household Member?</u> Relation to Protected Pe
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Date: Time: □ a.m. □ p.m.	In addition to conservator of Check he "Attachm	o the elder or depot that person are Full Name re if there are an	pendent adult named in ①, the force protected by the temporary order Sex Age dditional protected persons. List to	ers indicated below: Household Member? Relation to Protected Pe Yes No Yes No Them on an attached sheet of paper and write
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Case Number:	

To the Person in 2:

The court has issued the temporary orders checked as granted below. If you do not obey these orders, you can be arrested and charged with a crime. You may have to go to jail for up to one year, pay a fine of up to \$1,000, or both .

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, P(al Conduct Orders	11149.41 - 1				
L		•	d Until the I	•	☐ Granted	_	ws:
a.		ust not do the following thing	_	•	adult named 11	n (1)	
	(1) [nd to the other protected person Physically abuse, financially	\sim		uttack strike s	ctalk threat	en accault (cevually d
	(1)	otherwise), hit, harass, destr					
	(2)	Contact the person, either di telephone, in writing, by pul or by other electronic means	blic or private	•	•		_
	(3)	Take any action to obtain the found good cause not to male	_	ress or locatio	n. If this item	3 is not c	hecked, the court has
	(4)	Other (specify): Other personal conduct of	orders are attac	ched at the end	d of this Order	r on Attachr	ment 5a(4).
b.	Peacef	ul written contact through a la	awyer or a prod	cess server or	other person f	for service o	of legal papers related
	to a co on the tay-Av	urt case is allowed and does not person in 1. yay Orders	not violate this	order. Howev	er, you may h	ave your pa	pers served by mail
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	ot Issued (financial abuse only)
	rder must be granted unless only financial abuse is alleged.
	a cannot own, possess, have, buy or try to buy, receive or try to receive, or in any other way get guns, other arms, or ammunition. I 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. This must be done within 24 hours of being served w this Order. File a receipt with the court within 48 hours of receiving this Order that proves that your guns or firearr have been turned in, sold, or stored. (<i>You may use Form EA-800</i> , Proof of Firearms Turned In, Sold, or Stored, <i>for the receipt</i> .)
c. 🗌	The court has received information that you own or possess a firearm.
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Other No No Add Mand This O Califor	ation, or any other form of abuse. Orders It Requested Denied Until the Hearing Granted as Follows (specify): ditional orders are attached at the end of this Order on Attachment 10. To the Person in 1: atory Entry of Order Into CARPOS Through CLETS rder must be entered into the California Restraining and Protective Order System (CARPOS) through the
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Case Number:

12)	No Fee to Serve (Notify) Restrained Person
	If the sheriff or marshal serves this Order, he or she will do it for free.
13)	Number of pages attached to this Order, if any:
	Date:
	Judicial Officer

Case Number:

Warnings and Notices to the Restrained Person in 2

Possession of Guns or Firearms

If the court grants the orders in item (8), you cannot own, have, possess, buy or try to buy, receive or try to receive, or otherwise get guns, other firearms, or ammunition while this Order is in effect. If you do, you can go to jail and pay a \$1,000 fine. You must sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any guns or other firearms that you have or control as stated in item (8). The court will require you to prove that you did so.

Notice Regarding Nonappearance at Hearing and Service of Order

If you have been personally served with this Temporary Restraining Order and Form EA-109, *Notice of Court Hearing*, but you do not appear at the hearing either in person or by a lawyer, and a restraining order that does not differ from this order except for the expiration date is issued at the hearing, a copy of the order will be served on you by mail at the address in item (2).

If this address is not correct or you wish to verify that the Temporary Restraining Order was converted into a restraining order at the hearing without substantive change, or to find out the duration of the order, contact the clerk of the court.

After You Have Been Served With a Restraining Order

- Obey all the orders.
- Read Form EA-120-INFO, How Can I Respond to a Request for Elder or Dependent Adult Abuse Retraining Orders?, to learn how to respond to this Order.
- If you want to respond, fill out Form EA-120, *Response to Request for Elder or Dependent Adult Abuse Restraining Orders*, and file it with the court clerk. You do not have to pay any fee to file your response.
- You must have Form EA-120 served on the person in (1) (the person asking the court for protection of the elder or dependent adult or the elder or dependent adult if no other person is named in that item), or that person's attorney, by mail. You cannot do this yourself. The person who does the mailing should complete and sign Form EA-250, *Proof of Service of Response by Mail*. File the completed proof of service with the court clerk before the hearing date or bring it with you to the hearing.
- In addition to the response, you may file and have declarations served signed by you and other persons who have personal knowledge of the facts. You may use Form MC-030, *Declaration*, for this purpose. It is available from the clerk's office at the court shown on page 1 of this form or at www.courts.ca.gov/forms. If you do not know how to prepare a declaration, you should see a lawyer.
- Whether or not you file a response, you should attend the hearing. If you have any witnesses, they must also go to the hearing.
- At the hearing, the judge can make restraining orders against you that last for up to five years. Tell the judge why you disagree with the orders requested.

This is a Court Order.

Case Number:		

Instructions for Law Enforcement

Enforcing the Restraining Order

This order is enforceable by any law enforcement agency that has received the order, is shown a copy of the order, or has verified its existence on the California Restraining and Protective Orders System (CARPOS). If the law enforcement agency has not received proof of service on the restrained person, the agency must advise the restrained person of the terms of the order and then must enforce it. Violations of this order are subject to criminal penalties.

Start Date and End Date of Orders

This order *starts* on the date next to the judge's signature on page 4. The order *ends* on the expiration date in item **4** on page 1.

Arrest Required if Order Is Violated

If an officer has probable cause to believe that the restrained person had notice of the order and has disobeyed the order, the officer must arrest the restrained person. (Pen. Code, §§ 836(c)(1), 13701(b).) A violation of the order may be a violation of Penal Code section 166 or 273.6. Agencies are encouraged to enter violation messages into CARPOS.

Notice/Proof of Service

The law enforcement agency must first determine if the restrained person had notice of the order. Consider the restrained person "served" (given notice) if (Pen. Code, § 836(c)(2)):

- The officer sees a copy of the Proof of Service or confirms that the Proof of Service is on file; or
- The restrained person was informed of the order by an officer.

An officer can obtain information about the contents of the order and proof of service in CARPOS. If proof of service on the restrained person cannot be verified, the agency must advise the restrained person of the terms of the order and then enforce it.

If the Protected Person Contacts the Restrained Person

Even if the protected person invites or consents to contact with the restrained person, this order remains in effect and must be enforced. The protected person cannot be arrested for inviting or consenting to contact with the restrained person. The order can be changed only by another court order. (Pen. Code, § 13710(b).)

This is a Court Order.

Case Number:	

Conflicting Orders—Priorities of Enforcement

If more than one restraining order has been issued, the orders must be enforced according to the following priorities: (See Pen. Code, § 136.2, Fam. Code, §§ 6383(h)(2), 6405(b).)

- 1. EPO: If one of the orders is an Emergency Protective Order (Form EPO-001) and is more restrictive than other restraining or protective orders, it has precedence in enforcement over all other orders.
- 2. No Contact Order: If there is no EPO, a no-contact order that is included in a restraining or protective order has precedence over any other restraining or protective order.
- 3. Criminal Order: If none of the orders includes a no contact order, a domestic violence protective order issued in a criminal case takes precedence in enforcement over any conflicting civil court order. Any nonconflicting terms of the civil restraining order remain in effect and enforceable.
- 4. Family, Juvenile, or Civil Order: If more than one family, juvenile, or other civil restraining or protective order has been issued, the one that was issued last must be enforced.

(Clerk will fill out this part.) —Clerk's Certificate— Clerk's Certificate I certify that this *Temporary Restraining Order* is a true and correct copy of the original on file in the court. _____ Clerk, by _____ , Deputy

This is a Court Order.

[seal]