

Clerk stamps date here when form is filed.

DRAFT
Not Approved by the
Judicial Council

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

1 Name of Protected Person:

Your lawyer in this case (if you have one):

Name: _____ State Bar No.: _____

Firm Name: _____

Address (If you have a lawyer for this case, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, give a different mailing address instead. You do not have to give your telephone, fax, or e-mail.):

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-Mail Address: _____

2 Name of Restrained Person:

Description of restrained person:

Sex: ☐ M ☐ F Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Race: _____ Age: _____ Date of Birth: _____

Mailing Address (if known): _____

City: _____ State: _____ Zip: _____

Relationship to protected person: _____

3 Hearing

There was a hearing on (date): _____ at (time): _____ ☐ a.m. ☐ p.m. Dept. _____ Room: _____

These people were at the hearing:

a. ☐ The person in ① c. ☐ The lawyer for the person in ① (name): _____

b. ☐ The person in ② d. ☐ The lawyer for the person in ② (name): _____

4 Renewal and Expiration

The request to renew the attached restraining order, issued on (date): _____ is:

a. ☐ GRANTED. The attached restraining 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

(Child custody, visitation, and support orders may have been modified and may be different from those issued on the attached restraining order).

b. ☐ DENIED. The attached restraining order expires as stated in that order.

Number of pages attached: _____

Date: _____

Judicial Officer

This is a Court Order.