

# Response to Request for Elder or Dependent Adult Abuse Restraining Orders

Clerk stamps date here when form is filed.

## Use this form to respond to the Request (form EA-100)

- Read *How Can I Respond to a Request for Elder or Dependent Adult Abuse Restraining Orders?* (form \_\_\_\_\_) to protect your rights.
- Fill out this form and take it to the court clerk.
- Have someone age 18 or older—not you—serve the person requesting protection in ① by mail with a copy of this form and any attached pages. (Use form \_\_\_\_\_, Proof of Service of Response by Mail.)

### 1 Elder or Dependent Adult Seeking Protection

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

Name of person asking for the protection, if different (*This is the person named in item ③ of the request (form EA-100).*) \_\_\_\_\_

Fill in court name and street address:

**Superior Court of California, County of**

### 2 Person From Whom Protection Is Sought

a. Your Name: \_\_\_\_\_

Your Lawyer (*if you have one for this case*) \_\_\_\_\_

Name: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

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

Court fills in case number when form is filed.

**Case Number:**

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-109, item ③, here:

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

**If you were served with a Temporary Restraining Order, you must obey it until the hearing.** At the hearing, the court may make orders against you that last for up to five years.

### 3 Personal Conduct Orders

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested. (*Specify why you disagree in item ⑯ on page 4.*)
- c.  I agree to the following orders (*specify below or in item ⑯ on page 4*):  
\_\_\_\_\_  
\_\_\_\_\_

### 4 Stay-Away Orders

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested. (*Specify why you disagree in item ⑯ on page 4.*)
- c.  I agree to the following orders (*specify below or in item ⑯ on page 4*):  
\_\_\_\_\_  
\_\_\_\_\_



**5**  **Move-Out Orders**

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested. (*Specify why you disagree in item 15 on page 4.*)
- c.  I agree to the following orders (*specify below or in item 15 on page 4*):  


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**6**  **Additional Protected Persons**

- a.  I agree that the persons listed in item 6 of form EA-100 may be protected by the order requested.
- b.  I do not agree that the persons listed in item 6 of form EA-100 may be protected by the order requested.

**7**  **Order for Counseling or Anger Management Courses**

**i** This item is only available in instances of alleged physical abuse or deprivation of care, not in cases with only alleged financial abuse.

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested. (*Specify why you disagree in item 15 on page 4.*)
- c.  I agree to the following orders (*specify below or in item 15 on page 4*):  


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**8 Firearms (Guns), Firearm Parts, and Ammunition**

If you were served with form EA-110, *Temporary Restraining Order*, you cannot own or possess any firearms (guns), firearm parts, or ammunition. This includes firearm receivers and frames, and any item that may be used as or easily turned into a receiver or frame (see Penal Code section 16531). (See item 8 of form EA-110.) You must sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any firearms (guns) or firearm parts in your immediate possession or control within 24 hours of being served with form EA-110. You must file a receipt with the court. You may use form , *Receipt for Firearms and Firearm Parts*, for the receipt.

- a.  I do not own or control any firearms (guns), firearm parts, or ammunition.
- b.  I ask for an exemption from the firearms prohibition under Code of Civil Procedure section 527.9(f) because carrying a firearm is a condition of my employment, and my employer is unable to reassign me to another position where a firearm is unnecessary. (*Explain*):  
 *Check here if there is not enough space below for your answer. Put your complete answer on an attached sheet of paper and write "Attachment 8b—Firearms Surrender Exemption" as a title. You may use for , Attachment.*  


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- c.  I have turned in my firearms (guns) and firearm parts to the police or sold them to or stored them with a licensed gun dealer.

A copy of the receipt  is attached.  has already been filed with the court.

**9 No Body Armor**

If you were served with form EA-110, *Temporary Restraining Order*, you are prohibited from owning, possessing, or buying body armor. You must also relinquish any body armor you have in your possession.

(Check all that apply):

- a.  I do not own or have any body armor.
- b.  I have relinquished all body armor that I have in my possession.
- c.  I was granted an exception, or will ask for an exception, to have body armor. Note: This exception is granted by a chief of police or sheriff. See Penal Code section 31360(c). (*Attach a copy of the letter granting permission, if you have one.*)

**10  Debts Caused by Financial Abuse**

- a.  I agree to the findings requested.
- b.  I do not agree to the findings requested. (*Specify why you disagree in item 15 on page 4.*)
- c.  I agree to the following findings (*specify below or in item 15 on page 4*):  
\_\_\_\_\_  
\_\_\_\_\_

**11  Possession and Protection of Animals**

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested. (*Specify why you disagree in item 15 on page 4.*)
- c.  I agree to the following orders (*specify below or in item 15 on page 4*):  
\_\_\_\_\_  
\_\_\_\_\_

**12  Other Orders**

- a.  I agree to the orders requested.
- b.  I do not agree to the orders requested. (*Specify why you disagree in item 15 on page 4.*)
- c.  I agree to the following orders (*specify below or in item 15 on page 4*):  
\_\_\_\_\_  
\_\_\_\_\_

**13  Denial**

I did not do anything described in item 8 of form EA-100. (*Skip to 15.*)

**(14)  Justification or Excuse**

If I did some or all of the things that the person in (1) has accused me of, my actions were justified or excused for the following reasons (*explain*):

Check here if there is not enough space below for your answer. Put your complete answer on an attached sheet of paper and write "Attachment 14—Justification or Excuse" as a title. You may use form MC-025, Attachment.

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**(15)  Reasons I Do Not Agree to the Requests**

*Explain your answers to each order or finding requested that you do not agree with.*

Check here if there is not enough space below for your answer. Put your complete answer on an attached sheet of paper and write "Attachment 15—Reasons I Disagree" as a title. You may use form MC-025, Attachment.

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**(16)  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 16—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 protection named in ① that I pay his or her lawyer's fees and costs.

**(17)** 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*