	DV-100 Request for	Order	Clerk stamps date here when form is filed
1	Your name (person asking for protecti	ion)·	
	Your address (skip this if you have a le to be private, give a mailing address in		
	City: Sta	•	
	Your telephone number (optional)		The second secon
	Your lawyer (if you have one) (Name, and State Bar number)	-	Superior Court of California, County of
<b>(2</b> )	Name of person you want protection f	from:	Clad fills in age work as when form is filled
)	Description of that person: Sex: Neight: Race:	Hair Color:	Clerk fills in case number when form is filed.  Case Number:
	Eye Color: Age:	Date of Birth:	
3	Full Name  Check here if you need more space your statement NOTE In any item instead.	Age       Lives with the second control of the	□ No       □ No       □ No       □ No
4	f.  We are dating or used to date.  g.  We are engaged to be married of the late.  We are the parents together of a Child's Name:  Child's Name:  Child's Name:  Child's Name:	red domestic partners.  stered domestic partners.  lated by adoption (specify relationsh) or were engaged to be married. a child or children under 18:	Date of Birth: Date of Birth: Date of Birth: Date of Birth:  Date of Birth:  Part of Birth: Are "DV-100, Item 4h" by your statement or children. (Attach a copy if you have

This is not a Court Order.

	Case Number:					
Your name:						
Other Court Cases  a. Have you and the person in ② been involved in another court If yes, where? County:  What are the case numbers? (If you know)  What kind of case? (Check all that apply)  Registered Domestic Partnership □ Divorce/Dissolution □ Domestic Violence □ Criminal □ Juvenile □ Chi	State:					
b. Are there any domestic violence restraining/protective orders in No  Yes If yes, attach a copy if you have one.						
What orders do you want? Check the boxes	that apply to your case. ☑					
<ul> <li>6 ☐ Personal Conduct Orders I ask the court to order the person in ② not to do the followin a. ☐ Harass, attack, strike, threaten, assault (sexually or other personal property, disturb the peace, keep under surveil b. ☐ Contact (either directly or indirectly), or telephone, or so the person in ② will be ordered not to take any action to get person, their family members, caretakers, or guardians unless</li> </ul>	erwise), hit, follow, stalk, molest, destroy llance, or block movements send messages or mail or e-mail the addresses or locations of any protected					
7 ☐ Stay-Away Order						
b. The people listed in 3 f. My vehicle	yards away from (check all that apply)  n's school or child care  ify)					
If the person listed in <b>2</b> is ordered to stay away from all the person to get to his or her home, school, job, or place of worship?						
8	not return to (address)					
I have the right to live at the above address because (explain)	I have the right to live at the above address because (explain)					
Child Custody, Visitation, and Child Support     I ask the court to order child custody, visitation, and/or child so Form DV-105	upport. You must fill out and attach					
10 Spousal Support  You can make this request only if you are married to, or are a and no spousal support order exists. To ask for spousal support before your hearing	rt, you must fill out, file, and serve Form FL-150					
This is not a Court O	ruer.					

<u></u>		Record Unlawfu	Communications						
_		I ask for the right to record communications made to me by the person in 2 that violate the judge's orders.							
12)		Property Control  I ask the court to give <i>only</i> me temporary use, possession, and control of the property listed here							
13)		Animals: Possession and Stay-Away Order  I ask for the sole possession, care, and control of the animals listed below. I ask the court to order the per  2 to stay at least yards away from and not take, sell, transfer, encumber, conceal, molest, attac strike, threaten, harm, or otherwise dispose of the following animals:							
		I ask for the animals	to be with me because:						
14)	Debt Payment  I ask the court to order the person in 2 to make these payments while the order is in effect.  Check here if you need more space Attach Form MC-020 and write "DV-100, Item 14—Deby your statement								
					Due date:				
		Pay to:	For:	Amount: \$	Due date:				
15)		Property Restraint I am married to or have a registered domestic partnership with the person in ②. I ask the judge to order that person in ② not borrow against, sell, hide, or get rid of or destroy any possessions or property, except in the usual course of business or for necessities of life. I also ask the judge to order the person in ② to notify me of any new or big expenses and to explain them to the court.							
16)	LJ	Attorney Fees and Costs  I ask that the person in 2 pay some or all of my attorney fees and costs.  You must complete and file Form FL-150, Income and Expense Declaration.							
17)		Payments for Costs and Services I ask that the person in ② pay the following: You can ask for lost earnings or your costs for services caused directly by the person in ② (damaged property, medical care, counseling, temporary housing, etc.) You must bring proof of these expenses to your hearing							
					Amount: \$				
		Pay to:		For:	Amount: \$				
18)		Batterer Intervention Program I ask the court to order the person listed in (2) to go to a 52-week batterer intervention program and show proof of completion to the court.							
19)	If yo	•			he orders for free, ask the court				

Case Number:

			Case Number:					
ur i	nan	me:						
) [		More Time for Notice I need extra time to notify the person in ② about these papers. Becaus want the papers served up to days before the date of the hearing If necessary, add additional facts	, For help, read Form DV-210-INFO					
) [		Other Orders What other orders are you asking for?						
		☐ Check here if you need more space Attach Form MC-020 and write your statement	"DV-100, Item 21—Other Orders" b					
]	I be <i>If th</i>	Ins or Other Firearms  elieve the person in ② owns or possesses guns or firearms □ Yes □  the judge approves the order, the person in ② will be required to sell to  as or firearms that he or she owns or possesses						
ä	Describe the most recent abuse.  a. Date of most recent abuse:  b. Who was there?							
	c. What did the person in ② do or say that made you afraid?							
	-							
(	d. Describe any use or threatened use of guns or other weapons:							
6	e. I	Describe any injuries:						
Ì	f. Did the police come?  No Yes  If yes, did they give you an Emergency Protective Order?  Yes No I don't know  Attach a copy if you have one  Check here if you need more space Use Form MC-020 and write "DV-100, Item 23—Recent Abuse" by  your statement  Check here if the person in 2 has abused you (or your children) other times Use Form DV-101 or Form							
		MC-020 to describe any previous abuse sclare under penalty of perjury under the laws of the State of California the	hat the information above is true and					
		rect.						
1	Date	C						
	T	e or print your name Sign your name						

This is not a Court Order.

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## **Description of Abuse**

Case Number:	
Case Mulliber.	

Y	our name:
	ame of person you want protection from (restrained person):
146	and of person you want protection from (restrained person).
De	escribe the 2nd most recent abuse.
a.	Date of 2nd most recent abuse:
b.	Who was there?
c.	What did the person in  ado or say to you that made you afraid?
	Describe any use or threatened use of guns or other weapons.
u.	Describe any use of uneatened use of guns of outer weapons.
 е.	Describe any injuries.
 f.	Did the police come? No Yes

our i	our name:							
4		escribe other recent abuse.						
	a.	Date of other recent abuse:						
	b.	Who was there?						
	-							
	c.	What did the person in 🚳 do or say to you that made you afraid?						
-								
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	d.	Describe any use or threatened use of guns or other weapons.						
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(	e.	Describe any injuries.						
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-		·						
Í		Did the police come? ☐ No ☐ Yes						
		If yes, did they give you an Emergency Protective Order?   Yes   No   I don't know						
		Attach a copy if you have one						
<u>`</u> ` Г	7	Describe other abuse against you or your children.						
		Describe other abuse against you or your children.						
	•							
	•							
	-							
	•							
	] .	If you need more space, check the box and attach Form MC-020 Or attach a sheet of paper and write						
		If you need more space, check the box and attach Form MC-020 Or attach a sheet of paper and write "DV-101 — Description of Abuse" at the top.						

Case Number: