

Clerk stamps date here when form is filed.

1 Your name (person asking for protection):

Your address (skip this if you have a lawyer): (If you want your address to be private, give a mailing address instead):

City: _____ State: _____ Zip: _____

Your telephone number (optional): (_____) _____

Your lawyer (if you have one): (Name, address, telephone number, and State Bar number):

Fill in court name and street address:

Superior Court of California, County of

2 Name of person you want protection from:

Describe the person: Sex: M F Weight: _____

Height: _____ Race: _____ Hair Color: _____

Eye Color: _____ Age: _____ Date of Birth: _____

Home Address (if you know): _____

City: _____ State: _____ Zip: _____

Work Address (if you know): _____

City: _____ State: _____ Zip: _____

3 Besides you, who needs protection? (Family or household members)

Full Name	Sex	Age	Lives with you?	How are they related to you?
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Check here if you need more space. Attach a sheet of paper and write "CH-100, item 3—Describe Protected Persons" at the top of the page.

4 Why are you filing in this court? (Check all that apply):

The person in 2 lives in this county.

I was hurt (physically or emotionally) by the person in 2 here.

Other (specify): _____

5 How do you know the person in 2? (Describe):

This is not a Court Order.



Your name: _____

- 6 Describe how the person in 2 has harassed you:
- a. Date of most recent harassment: _____
- b. Who was there? _____
- c. Did the person in 2 commit any acts of violence or threaten to commit any acts of violence against you?
 Yes No
If yes, describe those acts or threats: _____
- d. Did the person in 2 engage in a course of conduct that harassed you and caused substantial emotional distress? Yes No
If yes, describe: _____
- e. Did the conduct of the person in 2 described above seriously alarm, annoy, or harass you? Yes No
 Check here if you need more space. Attach a sheet of paper and write "CH-100, item 6—Describe Harassment" at the top of the page.

Check the orders you want

- 7 **Personal Conduct Order**
- I ask the court to order the person in 2 to NOT do the following things to me or anyone listed in 3:
- a. Harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, destroy personal property, keep under surveillance, or block movements.
- b. Contact (either directly or indirectly), or telephone, or send messages or mail or e-mail.

- 8 **Stay-Away Order**
- I ask the court to order the person in 2 to stay at least (specify): _____ yards away from me and the people listed in 3 and the places listed below: (Check all that apply):
- a. My home
- b. My job or workplace
- c. My children's school or child care
- d. My vehicle
- e. Other (specify): _____

If the court orders the person in 2 to stay away from all the places listed above, will that person still be able to get to his or her home, school, or job? Yes No

If no, explain: _____

- 9 **Others to Be Protected**
- Should the other people listed in 3 also be covered by the orders described above?
- Yes No Does not apply
- If yes, explain:* _____
- _____
- _____

This is not a Court Order.



Case Number: _____

Your name: _____

10 Order About Guns or Other Firearms

I ask the court to order the person in ② to be prohibited from owning, possessing, purchasing, or receiving, or attempting to purchase or receive firearms **and** to sell or turn in any guns or firearms that he or she controls.

11 **Other Orders**

I ask the court to order the person in ② to (specify): _____

12 **Temporary Orders**

Do you want the court to make orders now on the matters listed in ⑦, through ⑪ that will last until the hearing? Yes No

If yes, explain why you need these orders right now: _____

Check here if you need more space. Attach a sheet of paper and write "CH-100, item 12—Temporary Orders" at the top of the page.

13 Delivery of Orders to Law Enforcement

My lawyer or I will give copies of the orders to the following law enforcement agencies:

a. Name of Agency: _____
Address: _____
City: _____ State: _____ Zip: _____

b. Name of Agency: _____
Address: _____
City: _____ State: _____ Zip: _____

14 **Other Court Cases**

Have you ever asked any court for other restraining orders against the person in ② ? Yes No
If yes, specify the counties and case numbers if you know them: _____

15 **Time for Service**

You must have your papers personally served on (notify) the person in ② at least 5 days before the hearing, unless the court orders a different time for service. (Form CH-135 explains "What is Proof of Service?" Form CH-130 may be used to show the court that the papers have been served.) If your papers cannot be served at least 5 days before the hearing and you need more time, explain why:

This is not a Court Order.



Case Number: _____

Your name: _____

16 **No Fee for Filing**
I ask the court to waive the filing fee because the person in ② has used or threatened to use violence against me, has stalked me, or has acted or spoken in some other way that makes me reasonably fear violence. I am asking for a restraining order to stop this conduct.

17 **No Fee to Serve Orders**
I ask the court to order the sheriff or marshal to serve (notify) the person in ② about the orders for free because that person has stalked me or threatened me with sexual assault.
(To get free service of the court's orders without paying a fee, you must fill out and file the Request and Order for Free Service of Restraining Order (Form CH-101), and if you qualify for a fee waiver, you must also fill out and file the Application for Waiver of Court Fees and Costs (Form 982(a)(17).)

18 **Lawyer's Fees and Costs**
I ask the court to order payment of my:
a. Lawyer's fees
b. Out-of-pocket expenses
The amounts requested are:

<u>Item</u>	<u>Amount</u>	<u>Item</u>	<u>Amount</u>
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Check here if you need more space. Attach a sheet of paper and write "CH-100, item 18—Lawyer's Fees and Costs" at the top of the page.

19 **Additional Relief**
I ask the court for additional relief as may be proper.

20 Number of pages attached to this form, if any: _____

Date: _____

Attorney's name ▶ _____
Attorney's signature

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: _____

Type or print your name ▶ _____
Sign your name

This is not a Court Order.