

Clerk stamps date here when form is filed.

1 Name of person who asked for the order (protected person):

2 Your name: _____

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 (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

Clerk fills in case number:

Case Number:

Give the judge your answers to DV-100:

3 **Personal Conduct Orders**
I do do not agree to the order requested.

4 **Stay-Away Order**
I do do not agree to the order requested.

5 **Move-Out Order**
I do do not agree to the order requested.

6 **Child Custody**
a. I do do not agree to the custody order requested.
b. I am not the parent of the child listed in DV-105.
c. I ask for the following custody order (specify):

The judge can consider your Answer at the hearing. Write your hearing date and time here:

Hearing Date → Date: _____ Time: _____
Dept.: _____ Room: _____

You must obey the orders until the hearing.
If you do not come to this hearing, the judge can make the orders last for 3 years or longer.

d. I do do not agree to the orders requested to prevent child abduction.

7 **Visitation**
a. I do do not agree to the visitation order requested.
b. I ask for the following visitation order (specify): _____

8 **Child Support**
a. I do do not agree to the order requested.
b. I agree to pay guideline child support.
You must fill out, serve, and file Form FL-150 or FL-155.

9 **Spousal Support**
I do do not agree to the order requested.
Whether or not you agree, you must fill out, serve, and file Form FL-150.



Your name: _____

Case Number: _____

10 **Property Control**
I do do not agree to the order requested.
If you have other requests, list them in 20 below.

11 **Debt Payment**
I do do not agree to the order requested.
If you have other requests, list them in 20 below.

12 **Property Restraint**
I do do not agree to the order requested.
If you have other requests, list them in 20 below.

13 **Attorney Fees and Costs**
I do do not agree to the order requested.

14 **Payments for Costs and Services**
I do do not agree to the order requested.

15 **Animals**
I do do not agree to the order requested.

16 **Batterer Intervention Program**
I do do not agree to the order requested.

17 **Other Orders** (see item 21 on Form DV-100)
I do do not agree to the orders requested.

18 **Turn in guns or other firearms.**
a. I do not own or have any guns or firearms.
b. I have have not turned in my guns and firearms to the police or a licensed gun dealer.
c. A copy of the receipt is attached. has already been filed with the court.
You must file a receipt with the court within 48 hours after being served with temporary orders.

19 **I ask the court to order payment of my**
a. Attorney fees
b. Out-of-pocket expenses because the temporary restraining order was issued without enough supporting facts. The expenses are:
Item: _____ Amount: \$ _____ Item: _____ Amount: \$ _____
You must fill out, serve, and file Form FL-150.

20 **My Answer to the Statements in DV-100 and Other Requests**
Please attach your statement. Write "DV-120, Item 20—More Information" at the top. Be specific.

21 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