

DV-120-INFO How Can I Respond to a Request for Domestic Violence Restraining Order?

I was served with form DV-100, DV-109, or DV-110. What does this mean?

Someone has asked for a domestic violence restraining order against you. On the forms, you are the "person in ②" and the person who wants a restraining order against you is listed in ① on all the forms.

Form DV-100: This form has all the orders that the person in ① has asked the judge to order.

Form DV-109: Your court hearing (court date) is listed on this form. You should attend the court hearing if you do not agree to the orders requested. If you do not attend, the judge can make orders against you without hearing from you.

Form DV-110: If you were served with form DV-110, it means that the judge granted a temporary restraining order against you. You must follow the orders.

What is a Domestic Violence Restraining Order?

It is a court order that can help protect people who have been abused by someone they have been intimate with, or are closely related to. To be eligible, the person asking for the restraining order must be:

- Someone you date or used to date
- A spouse, ex-spouse, registered domestic partner, or ex-domestic partner
- Someone you live or lived with (more than a roommate)
- Your parent, sibling, child, grandparent, or grandchild related by blood, marriage, or adoption

What can a restraining order do?

A restraining order can include orders for you to:

- Not contact or harm the protected person, including children or others listed as protected people
- Stay away from all protected people and places
- Not have any firearms (guns), firearm parts, or ammunition. This includes homemade or untraceable guns, like "ghost guns."
- Move out of the place that you share with the protected person
- Follow custody and visitation orders
- Pay child support
- Pay spousal support
- Pay debt for property
- Give control of property (examples: cell phone, car, home) to the person asking for protection.

What if I have children with the person asking for a restraining order?

A restraining order can include orders for your children, including listing them as protected persons. It can also include child custody and visitation orders and orders to limit your ability to travel with your children.

How long does the order last?

If the judge granted a temporary restraining order (form DV-110), it will last until the hearing date. At your court hearing, the judge will decide whether to extend the order or cancel the order. The judge can extend the order for up to five years. Custody, visitation, child support, and spousal support orders can last longer than five years and they do not end when the restraining order ends.



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What do I do next?

Part 1: Turn in or sell prohibited items

If there is a temporary restraining order against you (see form DV-110), then you must immediately turn in, sell, or store any prohibited items you have or own. Prohibited items include:



- **Firearms**, including any handgun, rifle, shotgun, and assault weapon
- **Firearm parts** include any receiver, frame, or unfinished receiver/frame
- **Ammunition**, including bullets, shells, cartridges, and clips

You must then prove to the court that you've complied with the orders. Bring [form DV-800/JV-270, Receipt for Firearms, Firearm Parts, and Ammunition](#), to a gun dealer or law enforcement when you turn in your items. After DV-800/JV-270 is complete, file it with the court. You may ask the court for information on how to turn in, sell, or store these items in your city or county. You can also read [form DV-800-INFO/JV-270-INFO, How Do I Turn In, Sell, Or Store My Firearms, Firearm Parts, and Ammunition?](#)

Part 2: Respond in writing (optional)

"Respond" means to let the judge and the other side know whether you agree or disagree with the request for restraining order, and why. Responding in writing is optional and there is no penalty if you don't. If you need more time to prepare for your case, talk to a lawyer or self-help center staff before you file a response.

If you want to respond in writing, complete [form DV-120, Response to Request for Domestic Violence Restraining Order](#). After you complete the form, file it with the court. There is no court fee to file this form. Then "serve" the form on the person asking for the restraining order. "Serve" means to have someone 18 years old or older mail a copy to the person asking for the restraining order. You cannot be the one to mail your papers. The person who mails your form must fill out [form DV-250, Proof of Service by Mail](#). After form DV-250 is completed, file it with the court.

Part 3: Get ready and go to your court hearing

Your court hearing is listed on form DV-109, *Notice of Court Hearing*. You have the option of attending your hearing in-person or remotely (by phone, or videoconference if available). For information on how to attend your hearing remotely, go to the court's website. Some courts may require advance notice. At the hearing, you and the other side will have the opportunity to tell your side of the story. For more information, read [form DV-520-INFO, Get Ready for the Restraining Order Court Hearing](#). If you need more time to prepare your case, you may ask the judge for a new court date. The judge will decide whether to grant your request. Read [form DV-115-INFO, How to Ask For a New Hearing Date](#), for more information. Note that if the judge does give you a new court date and if there is a temporary restraining order against you, the judge will usually extend the temporary restraining order until the next court date.

What if I need an interpreter?



You may use [form INT-300](#) to request an interpreter or ask the clerk how you can request one.

What if I have a disability and need an accommodation?

You may use [form MC-410](#) to request assistance. Contact the disability/ADA coordinator at your local court for more information.

Request for Accommodations



Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the hearing. Contact the clerk's office or go to www.courts.ca.gov/forms.htm for *Disability Accommodation Request* ([form MC-410](#)). (Civil Code section 54.8.)



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Do I need a lawyer?

It's possible to go through this process without a lawyer. But having a restraining order against you may have a lot of consequences, and you may want to hire a lawyer. If you don't hire a lawyer, you can get free help from your court's self-help center.

What if I was arrested or have criminal charges against me?

Anything you write in your court papers or say at a hearing for this case and for any criminal case can be used against you. Talk to a lawyer if you have any concerns about what you can do and say.

Where can I find a self-help center?

Free legal help is available at your court's self-help center. Find your local court's self-help center at www.courts.ca.gov/selfhelp. Self-help center staff will not act as your lawyer but may be able to give you information to help you decide what to do in your case, and help you with the forms. Staff may also refer you to other agencies who may be able to help you.

What if I don't obey the order?

The police can arrest you. You can go to jail and pay a fine. You must still follow the orders even if you are not a U.S. citizen. If you are worried about your immigration status, talk to an immigration lawyer.

Can I use the restraining order to get divorced or end a domestic partnership?

No. These forms will not end your marriage or registered domestic partnership. You must file other forms to end your marriage or registered domestic partnership.

What if I want to leave the county or state?

You must still comply with the restraining order, including custody and visitation orders. The restraining order is valid anywhere in the United States.

What if I have more than one restraining order against me?

If the police are called to enforce the order, they will need to follow the rules of enforcement (see "Priority of Enforcement" listed on the back of form DV-110, DV-130, and CR-160). If you have questions about any of the orders against you, contact your local self-help center or talk to a lawyer. Find your local court's self-help center at:

www.courts.ca.gov/selfhelp.

What if I am a victim or survivor of domestic violence?

The National Domestic Violence Hotline provides free and private safety tips. Help is available in over 100 languages. Visit online at www.thehotline.org or call 1-800-799-7233; 1-800-787-3224 (TTY).

What if I need a restraining order against the other person?

Do not use form DV-120 to request a domestic violence restraining order. For information on how to file your own restraining order, read [form DV-505-INFO](#). You can also ask the court clerk about free or low-cost legal help.

Information about the court process is also available online

<https://selfhelp.courts.ca.gov/respond-to-DV-restraining-order>

Use this form if someone has asked for a domestic violence restraining order against you, and you want to respond in writing. You will need a copy of form DV-100, *Request for Domestic Violence Restraining Order*, that was filled out by the person who asked for a restraining order against you. There is no cost to file this form with the court.

Do not use this form if you want to ask for your own restraining order. Read [form DV-500-INFO](#), *Can a Domestic Violence Restraining Order Help Me?* to find out more about this type of restraining order.

Fill in court name and street address:

Superior Court of California, County of**1 Name of Person Asking for Protection:**

(See form DV-100, item ①):

2 Your Name:

Fill in case number:

Case Number:**! Address where you can receive court papers**

(This address will be used by the court and by the person in ① to send you official court dates, orders, and papers. For privacy, you may use another address like a post office box, a Safe at Home address, or another person's address, if you have their permission and can get your mail regularly. If you have a lawyer, give their information.)

Address: _____

City: _____ State: _____ Zip: _____

! Your contact information (optional)

(The court could use this information to contact you. If you don't want the person in ① to have this information, leave it blank or provide a safe phone number or email address. If you have a lawyer, give their information.)

Email Address: _____ Telephone: _____ Fax: _____

Your lawyer's information (if you have one)

Name: _____ State Bar No.: _____

Firm Name: _____

3 Your Hearing Date (Court Date)

Your hearing date is listed on form DV-109, *Notice of Court Hearing*. If you do not agree to having a restraining order against you, attend your hearing date. If you do not attend your hearing, the judge could grant a restraining order that could last up to five years.

This is not a Court Order.

How to complete this form: To answer the questions below, look at the form DV-100 filled out by the person in ①. Tip: When the restraining order forms say "the person in ②" that means you, and the "person in ①" means the person who is asking for a restraining order against you.

4 Information About You (see ② on form DV-100)

The person in ① listed your name, age, gender, and date of birth. If any of the information is incorrect, use the space below to give the correct information.

5 Your Relationship to the Person in ①

In item ③ of form DV-100, has the person in ① correctly described your relationship with them?

☐ Yes ☐ No If no, what is your relationship with the person in ①?:

6 History of Court Cases and Restraining Orders (see ④ on form DV-100)

The person in ① may have listed other court cases or restraining orders involving you. If information is incorrect or missing, use the space below to give information.

☐ Check here if you are including a copy of restraining order or court order that you want the judge to know about.

7 Other Protected People

If the judge grants a restraining order, it can include family or household members of the person in ①. See ⑧ on form DV-100 to see if the person in ① is asking for other people to be protected by the restraining order.

a. ☐ I agree to the order requested.

b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to:

8 Order to Not Abuse (see ⑩ on form DV-100)

a. ☐ I agree to the order requested.

b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to:

This is not a Court Order.



9 ☐ **No-Contact Order** (see 11 on form DV-100)

- a. ☐ I agree to the order requested.
- b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

10 ☐ **Stay-Away Order** (see 12 on form DV-100)

- a. ☐ I agree to the orders requested.
- b. ☐ I do not agree to the orders requested.

Explain why you disagree, or describe a different order that you would agree to: _____

11 ☐ **Order to Move Out** (see 13 on form DV-100)

- a. ☐ I agree to the order requested.
- b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

12 ☐ **Other Orders** (see 14 on form DV-100)

- a. ☐ I agree to the order requested.
- b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

13 ☐ **Child Custody and Visitation** (see 15 on form DV-100 and DV-105)

- a. ☐ I am **not** the parent of the child listed in form DV-105, *Request for Child Custody and Visitation Orders*
- b. ☐ I am the parent of the child or children listed in form DV-105 (check one):

(1) ☐ I agree to the orders requested.

(2) ☐ I do not agree to the orders requested. (Complete form DV-125, *Response to Request for Child Custody and Visitation Orders*, and attach it to this form.)

This is not a Court Order.

14 ☐ **Protect Animals** (see 16 on form DV-100)

- a. ☐ I agree to the orders requested.
- b. ☐ I do not agree to the orders requested.

Explain why you disagree, or describe a different order that you would agree to: _____

15 ☐ **Control of Property** (see 17 on form DV-100)

- a. ☐ I agree to the order requested.
- b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

16 ☐ **Health and Other Insurance** (see 18 on form DV-100)

- a. ☐ I agree to the order requested.
- b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

17 ☐ **Record Communications** (see 19 on form DV-100)

- a. ☐ I agree to the order requested.
- b. ☐ I do not agree to the order requested.

18 ☐ **Property Restraint** (see 20 on form DV-100)

- a. ☐ I agree to the order requested.
- b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

19 ☐ **Pay Debt (Bills) Owed for Property** (see 22 on form DV-100)

- a. ☐ I agree to the orders requested.
- b. ☐ I do not agree to the orders requested.

Explain why you disagree, or describe a different order that you would agree to: _____

This is not a Court Order.

(20) ☐ Pay Expenses Caused by the Abuse (see (23) on form DV-100)

- a. ☐ I agree to the order requested.
b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

(21) ☐ Child Support (see (24) on form DV-100)

- a. ☐ I agree to the order requested.
b. ☐ I do not agree to the order requested.
c. ☐ I agree to pay guideline child support. (Learn more about guideline child support at www.courts.ca.gov/selfhelp-support.htm.)

(22) ☐ Spousal Support (see (25) on form DV-100)

- a. ☐ I agree to the order requested.
b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

(23) ☐ Lawyer's Fees and Costs (see (26) on form DV-100)

- a. ☐ I agree to the order requested.
b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

- c. ☐ I ask that the person in (1) pay for some or all of my lawyer's fees and costs.

(24) ☐ Batterer Intervention Program (see (27) on form DV-100)

- a. ☐ I agree to the order requested.
b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

This is not a Court Order.



25 ☐ **Transfer Wireless Phone Account** (see 28 on form DV-100)

- a. ☐ I agree to the order requested.
- b. ☐ I do not agree to the order requested.

Explain why you disagree, or describe a different order that you would agree to: _____

26 **Firearms (Guns), Firearm Parts, or Ammunition** (see 29 on form DV-100)

If you were served with form DV-110, *Temporary Restraining Order*, you must follow the orders in 5 on form DV-110. You must file a receipt with the court from the law enforcement agency or a licensed gun dealer within 48 hours after you received form DV-110. You may use [form DV-800/JV-270, Receipt for Firearms, Firearm Parts, and Ammunition](#).

(Check all that apply)

- a. ☐ I do not own or have any prohibited items (firearms (guns), prohibited firearm parts, or ammunition).
- b. ☐ I have turned in all prohibited items that I have or own to law enforcement or sold/stored them with a licensed gun dealer. A copy of the receipt showing that I turned in, sold, or stored the prohibited items (check all that apply): ☐ is attached ☐ has already been filed with the court.
- c. ☐ I ask for an exception to carry a firearm for work only. (You will have to show the judge that your work requires you to have a firearm, and that your employer cannot reassign you to another position where a firearm is not needed. If you are a peace officer, there are additional requirements.)

(Give details, like what your job is and why you need a firearm): _____

27 **Cannot Look for Protected People** (see 30 on form DV-100)

- a. ☐ I agree to the order.
- b. ☐ I do not agree to the order.

Explain why you disagree, or describe a different order that you would agree to: _____

28 ☐ **Additional Reasons I Do Not Agree with the Request** (optional)

Explain why you do not agree to any of the orders requested by the person in 1 (give specific facts and reasons):

- ☐ Check here if you need more space. Attach a sheet of paper and write "DV-120, Additional Reasons I Do Not Agree with the Request" at the top.

This is not a Court Order.



29 ☐ **My Out-of-Pocket Expenses**

If the request for restraining order is denied by the judge at the court hearing, I ask the judge to order the person in **1** to pay my out-of-pocket expenses because the temporary restraining order was granted without enough supporting facts. The expenses are:

For: _____	Because: _____	Amount: \$
For: _____	Because: _____	Amount: \$
For: _____	Because: _____	Amount: \$

30 **Additional Pages**

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

31 **Your 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

32 **Your lawyer's signature** *(if you have one)*

Date: _____

Lawyer's name



Lawyer's signature

Your Next Steps

- If the person in **1** asked for child support, spousal support, or anyone is asking for lawyer's fees, you must complete [form FL-150, Income and Expense Declaration](#). If the person in **1** is only asking for child support (item 24 on form DV-100), you may be eligible to fill out a simpler form, [form FL-155](#). Read [form DV-570](#) to see if you are eligible to fill out form FL-155. Before your court date, you must file form FL-150 or FL-155 with the court. Then you must have a server mail a copy to the person in **1** and have your server complete [form DV-250, Proof of Service by Mail](#). After form DV-250 is completed, file it with the court.
- Prepare for your court date by gathering evidence or witnesses, if you have any. Learn more at: <https://selfhelp.courts.ca.gov/respond-domestic-violence-restraining-order>. More information is also available on [form DV-120-INFO, How Can I Respond to a Request for Domestic Violence Restraining Order?](#)

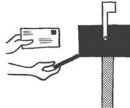
This is not a Court Order.

Clerk stamps date here when form is filed.

1 Name of Person Asking for Protection:**2 Name of Person to Be Restrained:****3 Notice to Server**

The server must:

- Be 18 years of age or over.
- Not be listed in items **1**, **2** or **3** of form DV-100, *Request for Domestic Violence Restraining Order*.
- Mail a copy of all documents checked in **4** to the person in **5**.

**4 I (the server) am 18 years of age or over and live in or am employed in the county where the mailing took place. I mailed a copy of all documents checked below to the person in 5:**

- a. ☐ DV-112, *Waiver of Hearing on Denied Request for Temporary Restraining Order*
- b. ☐ DV-120, *Response to Request for Domestic Violence Restraining Order*
- c. ☐ FL-150, *Income and Expense Declaration*
- d. ☐ FL-155, *Simplified Financial Statement*
- e. ☐ DV-130, *Restraining Order After Hearing (Order of Protection)*
- f. ☐ Other (specify): _____

5 I placed copies of the documents checked above in a sealed envelope and mailed them as described below:

- a. Name of person served: _____
- b. To this address: _____
City: _____ State: _____ Zip: _____
- c. Mailed on (date): _____
- d. Mailed from (city): _____ (state): _____

6 Server's Information

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____

If you are a registered process server:

County of registration: _____ Registration number: _____

7 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 server's name_____
Server to sign here

Fill in court name and street address:

Superior Court of California, County of

Fill in case number:

Case Number:

PARTY WITHOUT ATTORNEY OR ATTORNEY NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER: RESPONDENT: OTHER PARTY/PARENT/CLAIMANT:	
INCOME AND EXPENSE DECLARATION	CASE NUMBER:

1. Employment (Give information on your current job or, if you're unemployed, your most recent job.)

Attach copies of your pay stubs for last two months (black out Social Security numbers).

- a. Employer:
- b. Employer's address:
- c. Employer's phone number:
- d. Occupation:
- e. Date job started:
- f. If unemployed, date job ended:
- g. I work about _____ hours per week.
- h. I get paid \$ _____ gross (before taxes) ☐ per month ☐ per week ☐ per hour.

(If you have more than one job, attach an 8 1/2-by-11-inch sheet of paper and list the same information as above for your other jobs. Write "Question 1—Other Jobs" at the top.)

2. Age and education

- a. My age is (specify):
- b. I have completed high school or the equivalent: ☐ Yes ☐ No If no, highest grade completed (specify):
- c. Number of years of college completed (specify): ☐ Degree(s) obtained (specify):
- d. Number of years of graduate school completed (specify): ☐ Degree(s) obtained (specify):
- e. I have: ☐ professional/occupational license(s) (specify):
☐ vocational training (specify):

3. Tax information

- a. ☐ I last filed taxes for tax year (specify year):
- b. My tax filing status is ☐ single ☐ head of household ☐ married, filing separately
☐ married, filing jointly with (specify name):
- c. I file state tax returns in ☐ California ☐ other (specify state):
- d. I claim the following number of exemptions (including myself) on my taxes (specify):

4. **Other party's income.** I estimate the gross monthly income (before taxes) of the other party in this case at (specify): \$
 This estimate is based on (explain):

(If you need more space to answer any questions on this form, attach an 8 1/2-by-11-inch sheet of paper and write the question number before your answer.) Number of pages attached: _____

I declare under penalty of perjury under the laws of the State of California that the information contained on all pages of this form and any attachments is true and correct.

Date: _____

 (TYPE OR PRINT NAME)



 (SIGNATURE OF DECLARANT)

PETITIONER: RESPONDENT: OTHER PARTY/PARENT/CLAIMANT:	CASE NUMBER:
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Attach copies of your pay stubs for the last two months and proof of any other income. Take a copy of your latest federal tax return to the court hearing. (Black out your Social Security number on the pay stub and tax return.)

5. **Income** (For average monthly, add up all the income you received in each category in the last 12 months and divide the total by 12.)

	Last month	Average monthly
a. Salary or wages (gross, before taxes).....	\$	_____
b. Overtime (gross, before taxes).....	\$	_____
c. Commissions or bonuses.....	\$	_____
d. Public assistance (for example: TANF, SSI, GA/GR) <input type="checkbox"/> currently receiving	\$	_____
e. Spousal support <input type="checkbox"/> from this marriage <input type="checkbox"/> from a different marriage <input type="checkbox"/> federally taxable*	\$	_____
f. Partner support <input type="checkbox"/> from this domestic partnership <input type="checkbox"/> from a different domestic partnership	\$	_____
g. Pension/retirement fund payments.....	\$	_____
h. Social Security retirement (not SSI).....	\$	_____
i. Disability: <input type="checkbox"/> Social Security (not SSI) <input type="checkbox"/> State disability (SDI) <input type="checkbox"/> Private insurance	\$	_____
j. Unemployment compensation.....	\$	_____
k. Workers' compensation.....	\$	_____
l. Other (military allowances, royalty payments) (specify):	\$	_____

6. **Investment income** (Attach a schedule showing gross receipts less cash expenses for each piece of property.)

a. Dividends/interest.....	\$	_____
b. Rental property income.....	\$	_____
c. Trust income.....	\$	_____
d. Other (specify):	\$	_____

7. **Income from self-employment, after business expenses for all businesses**..... \$ _____

I am the ☐ owner/sole proprietor ☐ business partner ☐ other (specify): _____

Number of years in this business (specify): _____

Name of business (specify): _____

Type of business (specify): _____

Attach a profit and loss statement for the last two years or a Schedule C from your last federal tax return. Black out your Social Security number. If you have more than one business, provide the information above for each of your businesses.

8. ☐ **Additional income.** I received one-time money (lottery winnings, inheritance, etc.) in the last 12 months (specify source and amount): _____

9. ☐ **Change in income.** My financial situation has changed significantly over the last 12 months because (specify): _____

10. **Deductions**

	Last month
a. Required union dues.....	\$ _____
b. Required retirement payments (not Social Security, FICA, 401(k), or IRA).....	\$ _____
c. Medical, hospital, dental, and other health insurance premiums (total monthly amount).....	\$ _____
d. Child support that I pay for children from other relationships.....	\$ _____
e. Spousal support that I pay by court order from a different marriage <input type="checkbox"/> federally tax deductible*.....	\$ _____
f. Partner support that I pay by court order from a different domestic partnership.....	\$ _____
g. Necessary job-related expenses not reimbursed by my employer (attach explanation labeled "Question 10g").....	\$ _____

11. **Assets**

	Total
a. Cash and checking accounts, savings, credit union, money market, and other deposit accounts.....	\$ _____
b. Stocks, bonds, and other assets I could easily sell.....	\$ _____
c. All other property, <input type="checkbox"/> real and <input type="checkbox"/> personal (estimate fair market value minus the debts you owe).....	\$ _____

* Check the box if the spousal support order or judgment was executed by the parties and the court before January 1, 2019, or if a court-ordered change maintains the spousal support payments as taxable income to the recipient and tax deductible to the payor.

PETITIONER: RESPONDENT: OTHER PARTY/PARENT/CLAIMANT:	CASE NUMBER:
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12. The following people live with me:

Name	Age	How the person is related to me (ex: son)	That person's gross monthly income	Pays some of the household expenses?	
a.				<input type="checkbox"/> Yes	<input type="checkbox"/> No
b.				<input type="checkbox"/> Yes	<input type="checkbox"/> No
c.				<input type="checkbox"/> Yes	<input type="checkbox"/> No
d.				<input type="checkbox"/> Yes	<input type="checkbox"/> No
e.				<input type="checkbox"/> Yes	<input type="checkbox"/> No

13. Average monthly expenses ☐ Estimated expenses ☐ Actual expenses ☐ Proposed needs

a. Home: (1) <input type="checkbox"/> Rent or <input type="checkbox"/> mortgage..... \$ _____ If mortgage: (a) average principal: \$ _____ (b) average interest: \$ _____ (2) Real property taxes..... \$ _____ (3) Homeowner's or renter's insurance (if not included above)..... \$ _____ (4) Maintenance and repair..... \$ _____ b. Health-care costs not paid by insurance..... \$ _____ c. Child care..... \$ _____ d. Groceries and household supplies..... \$ _____ e. Eating out..... \$ _____ f. Utilities (gas, electric, water, trash)..... \$ _____ g. Telephone, cell phone, and e-mail..... \$ _____	h. Laundry and cleaning..... \$ _____ i. Clothes..... \$ _____ j. Education..... \$ _____ k. Entertainment, gifts, and vacation..... \$ _____ l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.)..... \$ _____ m. Insurance (life, accident, etc.; do not include auto, home, or health insurance)..... \$ _____ n. Savings and investments..... \$ _____ o. Charitable contributions..... \$ _____ p. Monthly payments listed in item 14 (itemize below in 14 and insert total here)..... \$ _____ q. Other (specify): \$ _____ <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> r. TOTAL EXPENSES (a–q) (do not add in the amounts in a(1)(a) and (b)) \$ _____ </div> s. Amount of expenses paid by others \$ _____
---	--

14. Installment payments and debts not listed above

Paid to	For	Amount	Balance	Date of last payment
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

15. Attorney fees (This information is required if either party is requesting attorney fees):

- a. To date, I have paid my attorney this amount for fees and costs (specify): \$
- b. The source of this money was (specify):
- c. I still owe the following fees and costs to my attorney (specify total owed): \$
- d. My attorney's hourly rate is (specify):

I confirm this fee arrangement.

Date: _____

(TYPE OR PRINT NAME)



(SIGNATURE OF DECLARANT)

PETITIONER: RESPONDENT: OTHER PARTY/PARENT/CLAIMANT:	CASE NUMBER:
--	--------------

CHILD SUPPORT INFORMATION
(NOTE: Fill out this page only if your case involves child support.)

16. Number of children

- a. I have *(specify number)*: _____ children under the age of 18 with the other parent in this case.
- b. The children spend _____ percent of their time with me and _____ percent of their time with the other parent.
(If you're not sure about percentage or it has not been agreed on, please describe your parenting schedule here.)

17. Children's health-care expenses

- a. ☐ I do ☐ I do not have health insurance available to me for the children through my job.
- b. Name of insurance company: _____
- c. Address of insurance company: _____
- d. The monthly cost for the **children's** health insurance is or would be *(specify)*: \$ _____
(Do not include the amount your employer pays.)

18. Additional expense for the children in this case

- | | Amount per month |
|---|------------------|
| a. Childcare so I can work or get job training..... | \$ _____ |
| b. Children's health care not covered by insurance..... | \$ _____ |
| c. Travel expenses for visitation..... | \$ _____ |
| d. Children's educational or other special needs <i>(specify below)</i> | \$ _____ |

19. Special hardships. I ask the court to consider the following special financial circumstances
(attach documentation of any item listed here, including court orders):

- | | Amount per month | For how many months? |
|--|------------------|----------------------|
| a. Extraordinary health expenses not included in 18b..... | \$ _____ | _____ |
| b. Major losses not covered by insurance <i>(examples: fire, theft, other insured loss)</i> | \$ _____ | _____ |
| c. (1) Expenses for my minor children who are from other relationships and are living with me..... | \$ _____ | _____ |
| (2) Names and ages of those children <i>(specify)</i> : _____ | | |

(3) Child support I receive for those children..... \$ _____

The expenses listed in a, b, and c create an extreme financial hardship because *(explain)*:

20. Other information I want the court to know concerning support in my case *(specify)*:

Your name and address or attorney's name and address: ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME: PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	TELEPHONE NO.:	FOR COURT USE ONLY
FINANCIAL STATEMENT (SIMPLIFIED)		CASE NUMBER:

NOTICE: Read page 2 to find out if you qualify to use this form and how to use it.

1. a. ☐ My only source of income is TANF, SSI, or GA/GR.
 b. ☐ I have applied for TANF, SSI, or GA/GR.
2. I am the parent of the following number of natural or adopted children from this relationship _____
3. a. The children from this relationship are with me this amount of time _____ %
 b. The children from this relationship are with the other parent this amount of time _____ %
 c. Our arrangement for custody and visitation is *(specify, using extra sheet if necessary)*:
4. My tax filing status is: ☐ single ☐ married filing jointly ☐ head of household ☐ married filing separately.
5. My current gross income *(before taxes)* per month is _____ \$
 This income comes from the following:

Attach 1
copy of pay
stubs for
last 2
months here
(cross out
social
security
numbers)

☐ Salary/wages: Amount before taxes per month _____ \$
☐ Retirement: Amount before taxes per month _____ \$
☐ Unemployment compensation: Amount per month _____ \$
☐ Workers' compensation: Amount per month _____ \$
☐ Social security: ☐ SSI ☐ Other Amount per month _____ \$
☐ Disability: Amount per month _____ \$
☐ Interest income (from bank accounts or other): Amount per month _____ \$

 I have no income other than as stated in this paragraph.
6. I pay the following monthly expenses for the children in this case:
 - a. ☐ Day care or preschool to allow me to work or go to school _____ \$
 - b. ☐ Health care not paid for by insurance _____ \$
 - c. ☐ School, education, tuition, or other special needs of the child _____ \$
 - d. ☐ Travel expenses for visitation _____ \$
7. ☐ There are *(specify number)* _____ other minor children of mine living with me. Their monthly expenses that I pay are _____ \$
8. I spend the following average monthly amounts *(please attach proof)*:
 - a. ☐ Job-related expenses that are not paid by my employer *(specify reasons for expenses on separate sheet)* _____ \$
 - b. ☐ Required union dues _____ \$
 - c. ☐ Required retirement payments (not social security, FICA, 401k or IRA) _____ \$
 - d. ☐ Health insurance costs _____ \$
 - e. ☐ Child support I am paying for other minor children of mine who are not living with me _____ \$
 - f. ☐ Spousal support I am paying because of a court order for another relationship _____ \$
 - g. ☐ Monthly housing costs: ☐ rent or ☐ mortgage _____ \$
 If mortgage: interest payments \$ _____ real property taxes \$ _____
9. Information concerning ☐ my current employment ☐ my most recent employment:

Employer:
 Address:
 Telephone number:
 My occupation:
 Date work started:
 Date work stopped *(if applicable)*: _____ What was your gross income *(before taxes)* before work stopped?: _____

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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10. My estimate of the other party's gross monthly income (*before taxes*) is \$ _____
11. My current spouse's monthly income (*before taxes*) is \$ _____
12. Other information I want the court to know concerning child support in my case (*attach extra sheet with the information*).
13. ☐ I am attaching a copy of page 3 of form FL-150, *Income and Expense Declaration* showing my expenses.

I declare under penalty of perjury under the laws of the State of California that the information contained on all pages of this form and any attachments is true and correct.

Date:

(TYPE OR PRINT NAME)	<div style="display: flex; justify-content: center; align-items: center;"> <div style="margin-right: 10px;">▶</div> <div style="border-bottom: 1px solid black; width: 100%;"></div> </div> <div style="display: flex; justify-content: center; align-items: center; margin-top: 5px;"> <div style="border: 1px solid black; width: 20px; height: 15px; margin-right: 5px;"></div> <div style="margin-right: 10px;">PETITIONER/PLAINTIFF</div> <div style="border: 1px solid black; width: 20px; height: 15px; margin-right: 5px;"></div> <div>RESPONDENT/DEFENDANT</div> </div>
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INSTRUCTIONS

Step 1: Are you eligible to use this form? *If your answer is YES to any of the following questions, you may NOT use this form:*

- Are you asking for spousal support (alimony) or a change in spousal support?
- Is your spouse or former spouse asking for spousal support (alimony) or a change in spousal support?
- Are you asking the other party to pay your attorney fees?
- Is the other party asking you to pay his or her attorney fees?
- Do you receive money (income) from any source other than the following?

<ul style="list-style-type: none"> • Welfare (such as TANF, GR, or GA) • Salary or wages • Disability • Unemployment 	<ul style="list-style-type: none"> • Interest • Workers' compensation • Social security • Retirement
--	--
- Are you self-employed?

If you are eligible to use this form and choose to do so, you do not need to complete the *Income and Expense Declaration* (form FL-150). Even if you are eligible to use this form, you may choose instead to use the *Income and Expense Declaration* (form FL-150).

Step 2: Make 2 copies of each of your pay stubs for the last two months. If you received money from other than wages or salary, include copies of the pay stub received with that money.

Privacy notice: If you wish, you may cross out your social security number if it appears on the pay stub, other payment notice or your tax return

Step 3: Make 2 copies of your most recent federal income tax form.

Step 4: Complete this form with the required information. Type the form if possible or complete it neatly and clearly in black ink. If you need additional room, please use plain or lined paper, 8½-by-11", and staple to this form.

Step 5: Make 2 copies of each side of this completed form and any attached pages.

Step 6: Serve a copy on the other party. Have someone other than yourself mail to the attorney for the other party, the other party, and the local child support agency, if they are handling the case, 1 copy of this form, 1 copy of each of your stubs for the last two months, and 1 copy of your most recent federal income tax return.

Step 7: File the original with the court. Staple this form with 1 copy of each of your pay stubs for the last two months. Take this document and give it to the clerk of the court. Check with your local court about how to submit your return.

Step 8: Keep the remaining copies of the documents for your file.

Step 9: Take the copy of your latest federal income tax return to the court hearing.

It is very important that you attend the hearings scheduled for this case. If you do not attend a hearing, the court may make an order without considering the information you want the court to consider.

What do I need to turn in, sell, or store?

You must turn in, sell, or store all of the following prohibited items that you have or own:

- Firearms, including any handgun, rifle, shotgun, and assault weapon;
- Firearm parts includes any receiver, frame, unfinished receiver, or unfinished frame (also called “ghost guns”); and
- Ammunition, including bullets, shells, cartridges, and clips.

How do I properly turn in, sell, or store the prohibited items?

You must take them to:

- Law enforcement, who will accept all prohibited items for safekeeping or to destroy,
or
- A licensed gun dealer, who can buy or store your firearms. If you have firearm parts or ammunition, call ahead for more information.

When do I turn in, sell, or store prohibited items?

Immediately, if law enforcement asks you to.
Otherwise, within 24 hours of being served, or told by a judge to do so.

Can I give my prohibited items to family or friends?

No, only to law enforcement or a licensed gun dealer.
You cannot give your prohibited items to a family member, friend, or anyone else.

Do I have to pay a fee to store prohibited items?

You may have to pay a fee. Contact law enforcement or a licensed gun dealer about fees and whether they have space to store your items.

How do I take prohibited items to law enforcement?

Call your local law enforcement agency to ask about their procedures. They will give you specific instructions, like making sure your firearms are unloaded and in the trunk of the car. Take a copy of the restraining order with you. **Do not** bring your firearms to court.

If I turn in my firearms to law enforcement, how long will they keep them?

It depends. There are procedures for getting your firearms back after a restraining order expires. Ask the law enforcement agency.

After I give my firearms to law enforcement, can I change my mind?

Yes. You are allowed to make one sale through a licensed gun dealer. To do this, a licensed gun dealer must present a bill of sale to your local law enforcement agency. The law enforcement agency will give the licensed gun dealer the firearms you are selling.

How do I prove to the judge that I have complied with (obeyed) the orders?

- ① Bring a copy of form DV-800/JV-270, *Receipt for Firearms, Firearm Parts, and Ammunition*, with you, and ask the dealer or officer to complete and sign the form.
- ② File form DV-800/JV-270 with the court. Make sure you get two copies. All receipts must be filed with the court within 48 hours from the time you were served with the restraining order, unless the judge gave you another deadline.



**Do I need to bring a copy of the
receipt to anyone besides the judge?**

Yes, if:

- ▶ Law enforcement served you with the restraining order, you must give them a copy of your receipt (example: form DV-800/JV-270). If you don't know who served you with the restraining order, ask the court clerk for a copy of the proof of service form for the restraining order. The law enforcement agency is listed on that form.
- ▶ You did not obey the order when you were supposed to, and the court notified law enforcement or a prosecuting attorney. (Tip: Look at forms DV-110, DV-130, or DV-820 to see if the court notified another agency. If the court did, give a copy of the receipt to the agencies listed on any of the forms).

Where can I find free help?

Free legal help is available at your court's self-help center. Find your local court's self-help center at www.courts.ca.gov/selfhelp. Self-help center staff will not act as your lawyer but may be able to give you information to help you decide what to do in your case, and help you with the forms. Staff may also refer you to other agencies who may be able to help you.

**More information on how to obey these
orders is available online**

<https://selfhelp.courts.ca.gov/respond-to-DV-restraining-order/obey-firearms-orders>.

1 Person Asking For Protection:

Name: _____

2 Your Information (Restrained Person)

a. Your Name: _____

b. Your Address

(This address could be used by the court and by the person in ① to send you official court dates, orders, and papers. For privacy, you may use another address like a post office box, or another person's address, if you have their permission and can get your mail regularly. If you have a lawyer, give their information.)

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email Address: _____

c. Your Lawyer (if you have one for this case):

Name: _____ State Bar No.: _____

Firm Name: _____

Fill in court name and street address:

Superior Court of California, County of

Court fills in case number when form is filed.

Case Number:**3 To the Restrained Person:**

If a judge has ordered you to turn in, sell, or store your firearms (guns), firearm parts, and ammunition, use this form to prove to the judge that you have obeyed their orders. Take this form to a law enforcement officer or a licensed gun dealer to complete ④ or ⑤. For more information on how to properly turn in your items, read form DV-800-INFO/JV-270-INFO, *How Do I Turn In, Sell, or Store My Firearms, Firearm Parts, and Ammunition?*

4**To Law Enforcement**

(Complete the section below. Keep a copy and give the original to the person in ②.)

Name of Law Enforcement Agency: _____

Name of Law Enforcement Agent: _____

Address: _____

Telephone number: _____ Email address: _____

Items Surrendered

a. Firearms, firearm parts, and ammunition transferred on:

Date: _____ Time: _____ ☐ a.m. ☐ p.m.

b. List of items. (List all the items surrendered by the person in ②. You may attach a separate form from your agency (e.g., a property report), use ⑥, or both.) Check below if you have attached a separate form:

☐ Separate form is attached. (If it does not include all surrendered items, list additional items in ⑥.)

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



Signature of law enforcement agent _____



5

To Licensed Gun Dealer

(Complete the section below. Keep a copy and give the original to the person in (2).)

Name of Licensed Gun Dealer: _____

License number: _____

Address: _____

Telephone number: _____ Email address: _____

Items Stored or Sold

a. Firearms, firearm parts, and ammunition transferred on:

Date: _____ Time: _____ ☐ a.m. ☐ p.m.

b. List of items. (List all the items surrendered by the person in (2). You may attach a separate form (e.g., DOJ's Report of Firearm Acquisition), use (6), or both.) Check below if you have attached a separate form:

☐ Separate form is attached. (If it does not include all surrendered items, list additional items in (6).)

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



Signature of licensed gun dealer _____

6

☐ **List of Items Surrendered**

a. Firearms and firearm parts

	Make	Model	Serial Number, if there is one	Sold	Stored	To be destroyed
(1)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(5)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(6)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. Ammunition

	Brand	Type	Amount	Sold	Stored	To be destroyed
(1)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(5)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(6)	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Check here if there is not enough space above for your answer. Use a separate sheet of paper to list other items and attach it to this form. Use "DV-800/JV-270, List of Surrendered Items" as a title.

7 To the Restrained Person:

Besides the items listed on page 2 or in an attached form, do you have or own any other firearms (guns), firearm parts, or ammunition?

☐ No

☐ Yes *(If yes, check one of the boxes below:)*

- a. ☐ I filed a *Receipt for Firearms, Firearm Parts, and Ammunition* (form DV-800/JV-270) or other proof for those items with the court on *(date)*: _____
- b. ☐ I am filing the proof for those firearms (guns), firearm parts, or ammunition along with this proof.
- c. ☐ I have not yet filed the proof for the other firearms (guns), firearm parts, or ammunition. *(Explain why not):*

Your 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

Your Next Steps

- After the form is complete, make two additional copies. Take the copies and original to the court clerk to file.
- If law enforcement served you with the restraining order, give a copy to the law enforcement agency that served you with the restraining order.
- Keep a copy for yourself.

Note that failure to file a receipt with the court and with the law enforcement agency is a violation of the judge's order.

