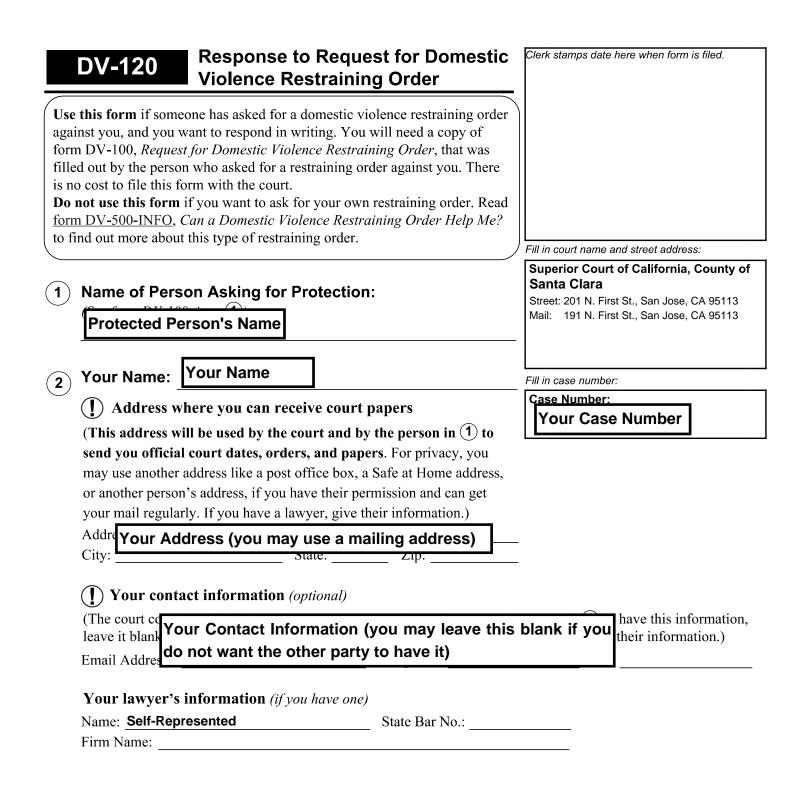
SHC-520-S



Rev. 1/1/2024

Please use the following samples to help you fill out the blank forms.



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.

Judicial Council of California, <u>www.courts.ca.gov</u> Rev. January 1, 2024, Mandatory Form Family Code, § 6200 et seq. Response to Request for Domestic Violence Restraining Order (Domestic Violence Prevention)

Case Number:

Your Case Number

How	so YOU WIII IOOK AL IOIIII DV-IUU LO _{1, and the "perso}				
in ($\frac{1}{2}$ answer the following questions.				
4	Information About You (see item 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 Use this section to correct or add information about yourself.				
5	Your Relationship to the Person in 1				
	Did the DV-100 correctly describe your relationship with the person in (1)? If not, describe your relationship here.				
6	History of Court Cases and Restraining Orders (see item (4) on form DV -100)				
	Use this section to let the court know about any cases or gyou. If information is incorrect restraining orders not listed on the DV-100.				
	Check here if you are including a copy of restraining order or court order that you want the judge to know about the state of the state				
7)	Other Protected People				
)	If the DV-100 lists other people to be protected, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you agree to a different order, describe the order.				
	Explain why you disagree, or describe a different order that you would agree to:				
8)	\Box Order to Not Abuse (see item 10 on form DV-100)				
	If the DV-100 asks for an order not to abuse, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you agree to a different order, describe the order.				

This is not a Court Order.

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9) 🗌 No-Contact Order (see item 🕦 on form DV-100)

If the DV-100 asks for a no-contact order, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you agree to a different order, describe the order.

(10) \Box Stay-Away Order (see item (12) on form DV-100)

If the DV-100 asks for a stay-away order, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you agree to a different order, describe the order.

(11) \Box Order to Move Out (see item (13) on form DV-100)

If the DV-100 asks for an order to move out, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you agree to a different order, describe the order.

(12) \Box Other Orders (see item (14) on form DV-100)

If the DV-100 asks for other orders in item 14, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you agree to a different order, describe the order.

(13) \Box Child Custody and Visitation (see item (15) on form DV-100 and DV-105)

If the DV-100 asks for a child custody and visitation order, mark the box to indicate whether you agree or disagree. If you disagree, ask staff for form DV-125.

(1) \square 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 item 16 on form DV-100)

If the DV-100 asks to protect animals, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

(15) \Box Control of Property (see item (17) on form DV-100)

If the DV-100 asks for control of property, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

(16) \Box Health and Other Insurance (see item (18) on form DV-100)

If the DV-100 asks for orders about health and other insurance, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

(17) \square Record Communications (see item (19) on form DV-100)

If the DV-100 asks to be able to record unlawful communication, mark the box to indicate whether you agree or disagree.

(18) \Box Property Restraint (see item 20) on form DV-100)

If the DV-100 asks for property restraint orders, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

(19) \Box Pay Debt (Bills) Owed for Property (see item (22) on form DV-100)

If the DV-100 asks for debt payment, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

This is not a Court Order.

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

If the DV-100 asks you to pay for expenses cause by abuse, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

(21) \Box Child Support (see item (24) on form DV-100)

If the DV-100 asks for child support, mark the box to indicate whether you agree or disagree. Or if you agree to pay guideline child support.

www.courts.ca.gov/selfhelp-support.htm.)

(22) \Box Spousal Support (see item (25) on form DV-100)

If the DV-100 asks for spousal support, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

23) 🔲 Lawyer's Fees and Costs

If you want to ask for the other party to pay your lawyer's fees and costs, mark box "23" amd check the box below. The court can only grant this request if the three criteria listed here are met. Your declaration should include information about why you believe this request was either frivolous or done only to abuse, intimidate or cause unneeded delay AND why you believe the person in (1) and afford to pay your lawyer's fees and costs.

 \Box Check here if you want the person in (1) to pay for some or all of your lawyer's fees and costs.

24 \square Batterer Intervention Program (see item 27) on form DV-100)

If the DV-100 asks the court to order a Batterer Intervention Program, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

This is not a Court Order.

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Your Case Number

(25) 🔲 Transfer Wireless Phone Account (see item (28) on form DV-100)

If the DV-100 asks to transfer a wireless phone account, mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

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

Complete this section to let the court know whether you own any guns, firearms or ammunition. If you do, you must should proof they were turned in, sold or stored with law enforcement or a licensed gun dealer. If you are asking for an exemption, mark box "c" and explain why. You should read Family Code 6389(h) to understand when this applies.

- 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 is 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 item 30) on form DV-100)

If the DV-100 asks to prohibit you from looking for the protected person(s), mark the box to indicate whether you agree or disagree. If you disagree, explain why. If you would agree to a different order, describe the order.

(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):

Use this section to explain why you do not agree with the request. You may attach additional 8.5" x 11", single-sided pages if needed. You may ask staff for additional pages.

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.

Response to Request for Domestic Violence Restraining Order (Domestic Violence Prevention) DV-120, Page 6 of 7

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If you are as	If you are asking for out-of-pocket expenses, fill in this section. enough supporting facts. The expenses are:				
enough supporti					
For:	Because:	Amount: \$			
For:	Because:	Amount: \$			
For:	Because:	Amount: \$			
Number of page	es attached to this form, if any: # of pages a	ttached			
1) Your signate I declare under	ure penalty of perjury under the laws of the State of day's Date	California that the information above is true a			
1 Your signate I declare under correct. Date: Print Your	ure penalty of perjury under the laws of the State of day's Date	California that the information above is true a Sign Your Name			
1 Your signate I declare under correct. Date: Print Your	ure penalty of perjury under the laws of the State of day's Date	California that the information above is true a			
Your signate I declare under correct. Date: Print Your	ure penalty of perjury under the laws of the State of day's Date	California that the information above is true a Sign Your Name			
Your signate I declare under correct. Date: Print Your	penalty of perjury under the laws of the State of day's Date Name pe or print your name	California that the information above is true a Sign Your Name			

Your Next Steps

- Turn in your completed form with the court.
- If the person in ① asked for child support, spousal support, or lawyer's fees, you must complete <u>form FL-150</u>, *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, <u>form FL-155</u>. Read <u>form DV-570</u> 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.
- Have someone else (not you) mail the person in ① a copy of your forms, and complete form DV-250, Proof of Service by Mail. File form DV-250 with the court. (The person who mails this form must be at least 18 years old and cannot be you or someone protected on the restraining order.)
- Prepare for your court date by gathering evidence or witnesses, if you have any. Learn more at <u>https://selfhelp.courts.ca.gov/respond-domestic-violence-restraining-order</u>. More information is also available on <u>form DV-120-INFO</u>, *How Can I Respond to a Request for Domestic Violence Restraining Order*?

This is not a Court Order.

	DV-250 Proof of Service by Mail	Clerk stamps date here when form is filed.			
1	Name of Person Asking for Protection: Protected Person's Name	SAMPLE ONLY			
2	Name of Person to Be Restrained: Print Your Name	Do not write			
3	Notice to Server	on this copy!			
\bigcirc	The server must: Read this information • 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. 	Fill in court name and street address: Superior Court of California, County of			
	• Mail a copy of all documents checked in (4) to the person in (5).	ASK STAFF TO STAMP CORRECT COURTHOUSE ADDRESS HERE.			
4	I (the server) am 18 years of age or over and live in or am employed in the county where the mailing tool, place. I mailed a count of all	ed Fill in case number:			
	in the county where the mailing took place. I mailed a copy of all documents checked below to the person in (5):	Generation of the second secon			
5	 (Server) who mailed a copy of your estraining Order response to the Protected Party. DV-130, Restraining Order After Hearing (Order of Protection) Other (specify): 				
	 a. Name Protected Person's name and address (use the address b. To thinot know their current address) 	s listed on their forms, if you do			
	c. Mailed on (<i>date</i>): Date forms were mailed d. Mailed from (<i>city</i>) City where papers were placed in the mail	State where papers were State in the mail			
6	Serve Name: Name of server (person who mailed your	forms to the other party)			
	Addre Server's address	State: Zip:			
	Telephor Server's phone number				
	If you are a registered process server.	Registration number:			
7	I declare under penalty of perjury under the laws of the State of Califor	ornia that the information above is true and			
	Date server signs this form				
	Server's name	rver's signature			
	Type or print server's name Server	to sign here			
Judicial Council of California, www.courts.ca.gov Revised January 1, 2020, Optional Form Family Code, §§ 6324, 6340-6344 Proof of Service by Mail (CLETS) DV-250, Page 1 of 1 (Domestic Violence Prevention)					