

EA-100 Request for Orders to Stop Elder or Dependent Adult Abuse

Clerk stamps date here when form is filed.

1 Name of the person asking for protection:

1) List the name, address and telephone number of the person asking for protection. If you want the address to be private then you may include an address where you receive mail but do not actually live.

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

City: _____ State: _____ Zip: _____

Person's telephone number (optional): (____) _____

Person's lawyer (if you have one): (Name, address, telephone number, and State Bar number): _____

2 Name of the person you want protection from:

2) List the name of the person you are requesting protection from (the abuser). This section should also include a detailed physical description of that person as well as their home and work addresses. List all information you have here, if you do not have a certain piece of information that is OK, just list as much as you have.

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 Who is asking the court for protection?

3) Select the box that applies to you. If you are requesting this order of protection for yourself Or if you are requesting this order of protection on behalf of someone else.

You, to protect yourself.

A person acting on your behalf:

A conservator Another person with legal authority to represent you.

If you are requesting protection for yourself, indicate that and go on to 4. If someone else is making this request, that person must attach a statement of who he or she is, his or her legal authority to make this request, and information about this representation, including any court appointments, the case numbers, and other relevant matters. Attach a sheet of paper and write "EA-100, item 3—Information About Person Requesting Orders."

If you are requesting this order of protection for someone else then an additional step is required...you will need to attach an additional piece of paper (can just be a normal blank piece of paper) and write "EA-100, item 3-Information about Person Requesting Orders". This piece of paper should include information as to WHY you have the authority to make this request to the court on behalf of the other party, essentially what your relationship is legally to this person

4 Describe the person asking for protection:

4) List here a description of the person who is asking for protection.

a. Age: _____

4a) List the age of the person asking for protection

b. If you are under age 65, do you have any physical or mental limitations that prevent you from carrying out normal activities or protecting your rights? Yes No (If yes, describe): _____

4b) If the person is 65 years of age or older then skip this section. If the person is less than 65 years of age then select the box appropriate to whether or not you have any physical or mental limitations that would prevent you from carrying out normal activities or protecting your own rights. If you select "yes" then describe these limitations here.

Check here if you need more space. Attach a sheet of paper and write "EA-100, item 4—Describe Protected Person" at the top of the page.

This is not a Court Order.

Your name: _____

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

5) List here how you know the person that you are requesting protection from. For example if this person is your caretaker you would indicate that, if this person is a family member or other relative you would describe your relationship to that person.

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

6) Select the box that appropriate box which describes why FRESNO COUNTY is the appropriate court to hear your request for an order of protection.

I was abused physically or emotionally in this county by the person in 2).

The person in 2) lives in this county.

Other (explain): _____

7)

7) If you have ever been involved in another court case with this person (even relating to a totally different matter) then select YES and indicate the details of that case below. If you have not been involved in another court case with this person then select NO

a. Have you and the person in 2) been involved in another court case? Yes No

If yes, where? County: _____ State: _____

What is the case number? (If you know): _____

What kind of case? (Check all that apply):

Elder abuse

Dependent adult abuse

Civil harassment

Domestic violence

Criminal

Other (specify): _____

b. Are there now any protective or restraining orders relating to you and the person in 2)?

Yes No If yes, attach a copy if you have one.

Check here if you need more space. Attach a sheet of paper and write "EA-100, item 7—Describe Other Cases" at the top of the page.

8)

8) If this is your FIRST request for a protective order against this person then select YES. If not, then select NO and select the appropriate box as to whether you are asking for a renewal of a previously established order of protection. If you have a had a previous case against this person then list the case number of the earlier order and indicate if you are now requesting a PERMANENT order or one which lasts only for a specific period of time (i.e. 2 years)

Is this your first request for a protective order against the person in 2)? Yes No

If no, are you asking for the renewal of an earlier protective order? Yes No

If you are asking for the renewal of an earlier order, provide the following information:

a. What was the case number of the earlier order? _____

b. How long do you want the renewed order to last? _____ years permanently

9)

9) Describe in this sections a-i how this person has abused you.

Describe in a. through i. how the person in 2) has abused you.

a. When was the most recent abuse (provide date or estimated date): _____

9a) Describe in this sections a-i how this person has abused you.

b. Who was there? _____

9b) List who was there at the time you were hurt, or any other witnesses who saw what occurred.

This is not a Court Order.

Your name: _____

c. In the most recent abuse, did the person in ② do any of the following to you: physically abuse, financially abuse, intimidate, molest, attack, assault (sexually or otherwise), hit, follow, stalk, threaten, harass, destroy personal property, keep under surveillance, block movements, or contact you (directly or indirectly) by telephone, mail, e-mail, messenger, or by any other means?

9c) If, in the most recent abuse the person abused you physically, financially or emotionally or contract you (either directly or indirectly) then select YES and describe the events below. If not then select NO and continue on.

Yes No

If yes, describe: _____

d. Has the person in ② previously abused you? Yes No

9d) If the person you are requesting protection from has previously abused you then select YES and describe the event. If not then select NO and continue on.

If yes, describe: _____

e. Describe any use or threatened use of guns or other weapons: _____

9e) Describe whether the person you are requesting protection from threatened you with any guns or other weapons and describe the event in this section. If not then continue on.

f. Did the police come? Yes No

9f) Did the police come to the most recent event in which you were abused? If yes, select YES and indicate whether or not they issued an emergency protective order at the scene. If not, then select NO and continue. If an emergency order was issued by the police then attach a copy of the protective order to this document if it is available to you.

If yes, did they give you an Emergency Protective Order? Yes No I don't know

Attach a copy, if you have one.

g. Is the person in ② a caregiver who didn't allow you to have goods or services you needed to avoid physical harm or mental suffering? Yes No

9g) Is the person who is abusing you your caregiver who didn't allow you the access to goods or services you needed to avoid physical harm or suffering? If yes then select YES and describe what happened below. If not select NO and continue on.

If yes, describe how that affected you: _____

This is not a Court Order.



Your name: _____

Case Number: _____

h. Did the case involve **solely financial abuse** unaccompanied by force, threat, harassment, intimidation, or any other form of abuse?

9h) Is this order of protection SOLELY based on financial abuse (that means there is no other harm occurring with the exception of monetary harm) which does NOT include any time of force, threat of force, harassment or intimidation? IF YES and this was ONLY financial abuse then select YES. If any other type of abuse occurred then select NO.

- Yes, only financial abuse.
- No, included other abuse described above.

i. Describe any injuries or harm you suffered as a result of the actions or deprivation described above:

9i) Describe here any injuries or harm you suffered as a result of this persons abuse towards you

- Check here if you need more space to explain any of the subparts in item 9. Attach a sheet of paper and write "EA-100, item 9, subpart ___—Describe Abuse" at the top of the page.

Check the orders you want

10) Personal Conduct Orders

10) Check the bold box which says "Personal Conduct Orders"

I ask the court to order the person in ② to **not** do the following things to me:

- a. Physically abuse, financially abuse, intimidate, molest, attack, assault (sexually or otherwise), hit, follow, stalk, threaten, harass, destroy my personal property, keep me under surveillance, or block my movements.

10a) Check BOX A if you want the person you are requesting this order of protection from to stop any type of physical abuse, financial abuse, intimidation, molestation, attacking or assaulting (sexually or otherwise), hitting, threatening, harassing etc

- b. Contact (either directly or indirectly), or telephone, or send messages or mail or e-mail.

10b) Check BOX B if you want the person you are requesting an order of protection from to stop contacting you (directly or indirectly) by any means. Essentially if you check this box the other party will not be able to contact you in any way.

The person in ② will be ordered not to take any action to get the addresses or locations of any protected person, or of that person's family members or caretakers, unless the court finds good cause not to make the order.

11) Stay-Away Orders

11) Check the bold box which says "Stay -Away Orders"

I ask the court to order the person in ② to stay at least (specify): _____ yards away from me and the places listed below (Check all that apply):

- a. My home
- b. My job or workplace
- c. My vehicle
- d. Other (specify): _____

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

If no, explain: _____

12) Move-Out Order

12) Move-Out Order.

Fill out this section if you are currently living with the person you are requesting protection from. You will list the address of the residence which you want the person to move away from.

**If you need this move-out order to be evaluated right away and to last until your hearing date then mark this box..Further in the line below you will need to indicate WHY you have a right to live at this address (for example if you are the owner of the property you would indicate that here)*

I ask the court to order the person in ② to move out from and not return to my residence at (address): _____

I will suffer physical or emotional harm if the person in ② does not leave the residence.

The title or lease to the residence is not in the sole name of the person in ② or the name of the person in ② and another person.

This is not a Court Order.

Your name: _____

Check the orders you want (continued)

I ask for this move-out order right away to last until the hearing, because:

a. I have the right to live at the above residence (explain): _____

b. The person in ② assaulted or threatened me.

13 Order About Guns or Other Firearms

13) SELECT THIS BOX "ORDER ABOUT GUNS OR OTHER FIREARMS" You do not need to do anything else in this section

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. The abuse in this case is **not solely financial abuse** unaccompanied by force, threat, harassment, intimidation, or any other form of abuse.

14 Other Orders

14) If you are asking the court for any additional orders against this person then you would indicate those here.

What other orders are you asking for? (Describe): _____

Check here if you need more space. Attach a sheet of paper and write "EA-100, item 14—Other Orders" at the top of the page.

15 Temporary Orders

Do you want the court to make orders right now on matters listed in ⑩ through ⑭? Yes No

If yes, explain why: _____

15) If you are requesting a temporary order of protection to last until your hearing date then select the Bold Box which says "temporary orders" and also mark the box YES

Explain to the court WHY you cannot wait until your hearing date, what makes your case so urgent that you need protection right away.

Check here if you need more space. Attach a sheet of paper and write "EA-100, item 15—Temporary Orders" at the top of the page.

16 Delivery of Orders to Law Enforcement Agencies

16) Select the box "The Court Clerk" and list the address information of the Sherriff's Department (if the person you are requesting protection from resides in Fresno County)

Name of Agency: Fresno County Sherriff's Department
Address: 2200 Fresno St.
Fresno, CA 93721

I request that copies of the court's orders be given by (check one):

- The court clerk
- Myself
- My lawyer

to the following law enforcement agencies:

a. Name of Agency: _____

Address: _____

City: _____ State: _____ Zip: _____

b. Name of Agency: _____

Address: _____

City: _____ State: _____ Zip: _____

This is not a Court Order.



Your name: _____

17) Request to Shorten Time for Service

You must have your papers personally served on the person in ② at least 5 days before the hearing, unless the court orders a different time for service. (Form EA-142-INFO, "What is Proof of Service?," explains how to serve (notify) the person in ②. Form EA-140 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:

17) Request to Shorten Time for Service

You must have these papers PERSONALLY served on the person you are requesting protection from at least 5 days before the hearing. DO NOT SELECT THIS BOX unless you have some unusual circumstance which would not allow you to serve the defendant 5 days prior to the hearing.

18) No Fee to Serve Orders

18) DO NOT DO ANYTHING

If you want the sheriff or marshal to serve (notify) the person in ② about the orders for free, ask the court clerk what you need to do.

19) Lawyer's Fees and Costs

19) DO NOT DO ANYTHING...although you can recover any court costs you spend money on typically you will not have any as there is no fee to file for an order of protection and a sheriff will deliver the papers free of charge.

I ask the court to order payment of my:

- a. Lawyer's fees
- b. Court costs

The amounts requested are:

Item	Amount	Item	Amount
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____
_____	\$ _____	_____	\$ _____

Check here if you need more space. Attach a sheet of paper and write "EA-100, item 19—Lawyer's Fees and Costs" at the top of the page.

20) Additional Relief

20) DO NOT DO ANYTHING.

I ask the court for additional relief as may be proper.

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

21) List the number of additional pages you are attaching to this form...Most likely you will not have any, however if you needed additional space then listed the number of pages you're attaching.

This Request for Orders to Stop Abuse must be personally served on the person in ②. The person requesting the orders may not serve these papers.

Date: **SKIP DATE** _____

SKIP LAWYERS NAME

Lawyer's name

SKIP LAWYERS SIGNATURE

Lawyer'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: **Fill in date** _____

Print name

Name of person filing this request

SIGN the name of the person filing this request with the court.

Signature of person filing this request

This is not a Court Order.