

DOMESTIC VIOLENCE RESTRAINING ORDER REQUEST

FORMS TO FILE

FORMS IN THIS PACKET:

- DV-100 Request for Domestic Violence Restraining Order and Attachments
- DV-105 Request for Child Custody and Visitation Orders
- FAM-020 Family Law Case Cover Sheet and Certificate of Grounds for Assignment to District
- FAM-018 Declaration Re: Notice of Ex Parte Request (No Notice Given)
- CLETS-001 Confidential CLETS Information*
- FL-150 Income and Expense Declaration
- DV-109 Notice of Court Hearing
- DV-110 Temporary Restraining Order
- DV-140 Child Custody and Visitation Order

You will file these forms with the court.

*The CLETS-001 form contains confidential information for law enforcement, to help them enforce the order if it is granted. **Do not file this form with the other forms.** Give this form to the clerk separately and they will make sure that it is submitted to law enforcement.

Clerk stamps date here when form is filed.

Instructions: To ask for a domestic violence restraining order, you will need to complete this form and other forms. After you complete this form, see next steps on page 12.

1 Person Asking for Protection

a. Your name: Victoria Garcia

b. Your age: 47

c. Address where you can receive court papers

(This address will be used by the court and by the person in 2 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: 1234 Survivor Road APT#10

City: Los Angeles State: CA Zip: 90012

d. Your contact information (optional)

(The court could use this information to contact you. If you don't want the person in 2 to have this information, leave it blank or provide a safe phone number or email address. If you have a lawyer, give their information.)

Telephone: (818) 818-8888 Fax:

Email Address:

e. Your lawyer's information (if you have one)

Name: State Bar No.:

Firm Name:

Fill in court name and street address:

Superior Court of California, County of LOS ANGELES 111 North Hill Street Los Angeles, CA 90012 CENTRAL DISTRICT

Court fills in case number when form is filed.

Case Number:

2 Person You Want Protection From

a. Full Name: Grace Johnson

b. Age (give estimate if you do not know exact age): 47

c. Date of Birth (if known): 7/1/1974

d. Gender: M F Nonbinary

e. Race: White

This is not a Court Order.



3 Your Relationship to the Person in 2

(If you do not have one of these relationships with the person in 2, you are not eligible for this type of restraining order. You may be eligible for another type of restraining order. Learn more at www.courts.ca.gov/selfhelp-abuse.htm.)

Check all that apply

a. We have a child or children together
(names of children): Adrien Garcia, Liza Garcia

b. We are married or registered domestic partners.

c. We used to be married or registered domestic partners.

d. We are dating or used to date.

e. We are or used to be engaged to be married.

f. We are related. The person in 2 is my (check all that apply):

- Parent, stepparent, or parent-in-law
- Brother, sister, sibling, or sibling-in-law
- Child, stepchild, or legally adopted child
- Grandparent or grandparent-in-law
- Child's spouse
- Grandchild or grandchild-in-law

g. We live together or used to live together. (If checked, answer question below):

Have you lived together with the person in 2 as a family or household (more than just roommates)?

Yes No (If no, you do not qualify for this kind of restraining order unless you checked one of the other relationships listed above.)

4 Other Restraining Orders and Court Cases

a. Are there any restraining orders currently in place or that have expired in the last six months (examples: Did the police give you a restraining order that lasts a few days? Do you have one from the criminal court?)

No

Yes (If yes, give information below and attach a copy if you have one.)

(1) (date of order): 12/25/2021 (date it expires): 01/03/2022

(2) (date of order): _____ (date it expires): _____

b. Are you involved in any other court case with the person in 2?

No

Yes (If you know, list where the case was filed (city, state, or tribe), the year it was filed, and case number.)

Custody _____

Divorce _____

Juvenile Court _____

Criminal _____

Other (what kind of case?): _____

This is not a Court Order.



Describe Abuse

In this section, explain how the person in (2) has been abusive. The judge will use this information to decide your request. Here are some examples of what "abuse" means under the law (*not a complete list*):

- harassed you
- made repeated unwanted contact with you
- tracked, controlled, or blocked your movements
- kept you from getting food or basic needs
- isolated you from friends, family, or other support
- made threats based on actual or suspected immigration status
- made you do something by force, threat, or intimidation
- stopped you from accessing or earning money
- hit, kicked, pushed, or bit you
- injured you or tried to
- threatened to hurt or kill you
- sexually abused you
- abused a pet or animal
- destroyed your property
- choked or strangled you
- abused your children

5 Most recent abuse

- a. Date of abuse (*give an estimate if you don't know the exact date*): 12/24/2021
- b. Did anyone else hear or see what happened on this day?
 I don't know No Yes (*If yes, give names*): _____
- c. Did the person in (2) use or threaten to use a gun or other weapon?
 No Yes (*If yes, describe gun or weapon*): _____
- d. Did the person in (2) cause you any emotional or physical harm?
 No Yes (*If yes, describe harm*):
I was scared. I felt pain and tenderness on my back and cheek. The next day, I woke up feeling a lump on my head and was sore throughout my upper body.
- e. Did the police come? I don't know No Yes (*If the police gave you a restraining order, list it in (4).*)
- f. Give more details about how the person in (2) was abusive on this day. Details can include what was said, done, or sent to you (examples: text messages, emails, or pictures), how often something happened, etc.
Grace Johnson physically abused me. She grabbed me. She pushed or shoved me. She pushed me against the wall or another item.
She slapped me with an open palm. Grace Johnson disturbed my peace. She put me down or called me humiliating and derogatory names. See declaration for additional details.

- g. How often has the person in (2) abused you like this?
 Just this once 2–5 times Weekly Other: _____
 Give dates or estimates of when it happened, if known:

This is not a Court Order.



6 Has the person in 2 abused you in a different way from the abuse you described in 5? If yes, describe below.

a. Date of abuse (give an estimate if you don't know the exact date): Early January 2021

b. Did anyone else hear or see what happened on this day?
 I don't know No Yes (If yes, give names): our children

c. Did the person in 2 use or threaten to use a gun or other weapon?
 No Yes (If yes, describe gun or weapon): _____

d. Did the person in 2 cause you any emotional or physical harm?
 No Yes (If yes, describe harm):
I was terrified. I thought Respondent was going to kill me when she was strangling me. I had pain to my neck. It was difficult and painful to swallow.

e. Did the police come? I don't know No Yes (If the police gave you a restraining order, list it in 4.)

f. Give more details about how the person in 2 was abusive on this day. Details can include what was said, done, or sent to you (examples: text messages, emails, or pictures), how often something happened, etc.
Grace Johnson physically abused me. She pushed or shoved me. She pushed me onto the bed or couch. She strangled me. She strangled me with two hands. This incident caused me difficulty breathing. This incident caused me to have soreness when I swallow. Grace Johnson threatened to kill me. Grace Johnson disturbed my peace. She put me down or called me humiliating and derogatory names. See declaration for additional details.

g. How often has the person in 2 abused you like this?
 Just this once 2-5 times Weekly Other: _____
Give dates or estimates of when it happened, if known:

This is not a Court Order.

7 Is there other abuse by the person in **2** that you want the judge to know about? If yes, describe below.

a. Date of abuse (give an estimate if you don't know the exact date): _____

b. Did anyone else hear or see what happened on this day?
 I don't know No Yes (If yes, give names): _____

c. Did the person in **2** use or threaten to use a gun or other weapon?
 No Yes (If yes, describe gun or weapon): _____

d. Did the person in **2** cause you any emotional or physical harm?
 No Yes (If yes, describe harm):

e. Did the police come? I don't know No Yes (If the police gave you a restraining order, list it in **4**.)

f. Give more details about how the person in **2** was abusive on this day. Details can include what was said, done, or sent to you (examples: text messages, emails, or pictures), how often something happened, etc.

g. How often has the person in **2** abused you like this?
 Just this once 2-5 times Weekly Other: _____
Give dates or estimates of when it happened, if known:

Check this box if you need more space to describe the abuse. You can use form DV-101, Description of Abuse, and turn it in with this form. You can also use a separate sheet of paper, write "Describe Abuse" abuse at the top, and turn it in with this form.

This is not a Court Order.



8 Other Protected People

Do you want the restraining order to protect your children, family, or someone you live with?

- a. No
- b. Yes (If yes, complete the section below):

(1) Full name	Age	Relationship to you	Lives with you?
<u>Adrien Garcia</u>	<u>14</u>	<u>Child</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<u>Liza Garcia</u>	<u>11</u>	<u>Child</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<u>Gloria Garcia</u>	<u>67</u>	<u>Aunt</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Check this box if you need to list more people. Use a separate piece of paper and write "DV-100, Other Protected People" at the top. Turn it in with this form.

(2) Why do these people need protection?



Respondent has been abusive towards me in front of our children on past occasions. The children live with me and I am concerned for their safety. My aunt, Gloria, also needs protection because she lives in the apartment above mine and she cares for the children when I am working. I want to ensure the safety of my family.

9 Does Person in (2) Have Firearms (Guns) or Ammunition?

- a. I don't know
- b. No
- c. Yes (If you have information, complete the section below.)

(1) Describe firearms or ammunition (examples: long, short, black, silver, handgun, rifle, semiautomatic):

(2) Number of firearms or ammunition, if known:


(3) Where they are located or stored, if known:

This is not a Court Order.



Summary of Comments on Sample Forms to File with Sample Attorney Comments.pdf

Page: 7

 Number: 1 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:29:27 PM

Does she have any reason to believe that her aunt need protection other than just her living nearby and caring for the children? Has Respondent ever threatened her aunt, abused in in front of her aunt, abused her aunt, or done anything else to indicate the aunt is at risk of harm?

Choose the Orders That You Want a Judge to Make

In this section, you will choose the orders you want a judge to make now. Every situation is different.
Choose the orders that fit your situation.

Check all the orders that you want a judge to make (order).

10 Order to Not Abuse

I ask the judge to order the person in (2) to not do the following things to me or anyone listed in (8):

Harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, molest, destroy personal property, keep under surveillance, impersonate (on the internet, electronically, or otherwise), block movements, annoy by phone or other electronic means (including repeatedly contact), or disturb the peace.

Disturbing the peace includes, but is not limited to:

- Isolating you from friends, relatives, or other support; keeping you from food or basic needs; controlling or keeping track of you, including your movements, contacts, actions, money, or access to services; and making you do something by force, threat, or intimidation, including threats related to actual or suspected immigration status.
- Destroying your mental or emotional well-being. This can be done directly or indirectly, such as through someone else. This can also be done in any way, including by phone, text, or online.

11 No-Contact Order

I ask the judge to order the person in (2) to not contact me or anyone listed in (8).

12 Stay-Away Order

a. I ask the judge to order the person in (2) to stay away from:

Check all that apply

Me.

My vehicle.

My children's school or childcare.

My home.

My school.

Other (*please explain*):

My job or workplace.

Each person in (8).

My aunt's home , 1234 Survivor Road
APT#20 Los Angeles, CA. 90012

b. How far do you want the person to stay away from all the places you checked above?

100 yards (300 feet) Other (*give distance in yards*): _____

This is not a Court Order.



12 Stay-Away Order (continued)

c. Do you and the person in (2) live together or live close to each other?

No Yes (If yes, check one):

Live together (If you live together, you can ask that the person in (2) move out in (13).)

Live in the same building, but not in the same home

Live in the same neighborhood

Other (please explain): _____

d. Do you and the person in (2) have the same workplace or go to the same school?

No Yes (If yes, check all that apply):

Work together at (name of company): _____

Go to the same school (name of school): _____

Other (please explain): _____

13 Order to Move Out

a. I ask the judge to order the person in (2) to move out of the home, located at:

(Give address): 1234 Survivor Road APT#10 Los Angeles, CA. 90012

b. I have a right to live at this address because:

Check all that apply

I own the home.

I have lived at this address for 2 years, 6 months.

My name is on the lease.

I pay for some or all the rent or mortgage.

I live at this address with my child(ren).

Other (please explain): _____

14 Other Orders

(Describe any additional orders you want the judge to make to keep you, your children, or the people in (8) safe.):

15 Child Custody and Visitation

Check this box if you have a child with the person in (2) and want the court to make or change a child custody/visitation order. You must also fill out form DV-105, Request for Child Custody and Visitation Orders, and attach

This is not a Court Order.



16 **Protect Animals**

a. (You may ask the court to protect your animals, your children's animals, or the person in ②'s animals.)

	Name (or other way to ID animal)	Type of animal	Breed (if known)	Color
(1)	_____	_____	_____	_____
(2)	_____	_____	_____	_____
(3)	_____	_____	_____	_____
(4)	_____	_____	_____	_____

b. I ask the judge to protect the animals listed above by ordering the person in ② to:

Check all that apply

(1) Stay away from the animals by at least:

100 yards (300 feet) Other (give distance in yards): _____

(2) **Not** take, sell, hide, molest, attack, strike, threaten, harm, get rid of, transfer, or borrow against the animals.

(3) Give me sole possession, care, and control of the animals because (check all that apply):

Person in ② abuses the animals. I take care of these animals.

I purchased these animals. Other (please explain): _____

17 **Control of Property**

a. I ask the judge to give **only me** temporary use, possession, and control of the property listed here (describe):

2019 Toyota Corolla (6PET123-CA)

b. Explain why you want control of the property you listed:



I ask for this order because the 2019 Toyota Corolla is my car but it is under Respondent's name only. I use the car to get to work, take the children to work, and run errands. Respondent has her own car. I fear that Respondent will try to take the car away from me in retaliation that I called the police for help.

18 **Health and Other Insurance**


I ask the judge to order the person in ② to **not** make any changes to any insurance or other coverage for me, the person in ②, or our children, including not being allowed to cancel, cash, borrow against, transfer, dispose of, or change the beneficiaries for the insurance.

19 **Record Communications**

I ask the judge to allow me to record calls or communications the person in ② makes to me, when those calls or communications violate this restraining order.

This is not a Court Order.



 Number: 1 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:31:07 PM
Can you please confirm whether this should say Take the children to "school"?

20 **Property Restraint** *(only if you are married or a registered domestic partner with the person in 2.)*

I ask the judge to order the person in 2 not to borrow against, sell, hide, or get rid of or destroy any possessions or property, except in the usual course of business or for necessities of life. I also ask the judge to order the person in 2 to notify me of any new or big expenses and to explain them to the court.

21 **Extend My Deadline to Give Notice to Person in 2**

(Usually, the judge will give you about two weeks to give notice, or to "serve" the person in 2 of your request. If you need more time to serve, the judge may be able to give you a few extra days.)

I ask the judge to give me more time to serve the person in 2 because *(explain why you need more time)*:

22 **Pay Debts (Bills) Owed for Property**

(If you want the person in 2 to pay any debts owed for property, list them and explain why. The amount can be for the entire bill or only a portion. Some examples include rent, mortgage, car payment, etc.)

a. I ask the judge to order the person in 2 to make these payments while the restraining order is in effect:

- (1) Pay to: Survivor Apartments For: Rent Amount: \$ 1,250 Due date: every month
- (2) Pay to: _____ For: _____ Amount: \$ _____ Due date: _____
- (3) Pay to: _____ For: _____ Amount: \$ _____ Due date: _____

Explain why you want the person in 2 to pay the debts listed above:

I ask for this order because Respondent paid half of the rent. I am unable to pay the whole rent on my own.

b. **Special decision (finding) by the judge if you did not agree to the debt** *(optional)*

(If you did not agree to the debt or debts listed above, you can ask the judge to decide (find) that one or more debts was made without your permission and resulted from the person in 2's abuse. This may help you defend against the debt if you are sued in another case.)

Do you want the judge to make this special decision (finding)?

No Yes *(If yes, answer the questions below.)*

(1) Which of the debts listed above resulted from the abuse? *(check all that apply)*:

a(1) a(2) a(3)

(2) Do you know how the person in 2 made the debt or debts?

No Yes

(If yes, explain how the person in 2 made the debt or debts):

This is not a Court Order.



Orders That You Want a Judge to Make at Your Court Date

Below is a list of orders that a judge cannot make right away but can make at your court date in a few weeks. The person in (2) must be notified of your court date before the judge can consider making any of the orders listed below. Check all the orders that you want the judge to make at your court date.

(23) Pay Expenses Caused by the Abuse

I ask the judge to order the person in (2) to pay for things **caused directly** by the person in (2) (damaged property, medical care, counseling, temporary housing, etc.). Bring proof of these amounts to your court date.

Pay to: _____ For: _____ Amount: \$ _____

Pay to: _____ For: _____ Amount: \$ _____

Pay to: _____ For: _____ Amount: \$ _____

(24) Child Support *(this only applies if you have a minor child with the person in (2))*

Check all that apply

- a. I do not have a child support order and I want one.
 b. I have a child support order and I want it changed *(attach a copy if you have one)*.
 c. I now receive or have applied for TANF, Welfare, or CalWORKS.

(25) Spousal Support *(this only applies if you are married or a registered domestic partner with person in (2))*

I ask the judge to order the person in (2) to give me financial assistance.

(26) Lawyer's Fees and Costs

I ask that the person in (2) pay for some or all of my lawyer's fees and costs.

(27) Batterer Intervention Program

I ask the judge to order the person listed in (2) to go to a 52-week batterer intervention program. (The goal of a batterer's intervention program is to stop abuse. There are weekly classes to teach accountability, abuse effects, and gender roles. If ordered to complete this program, the person in (2) would have to show proof to the judge that they enrolled and completed the program.)

(28) Transfer of Wireless Phone Account

(If the person in (2) holds the rights to your cell phone account, you can ask the judge to transfer your number or your child's number to you. This means you will be financially responsible for these accounts. If you want to have control over a mobile device, like a cell phone, make this request at (17).)

I ask the judge to order the wireless service provider to transfer the billing responsibility and rights to the wireless phone numbers listed below to me because the account currently belongs to the person in (2):

a. My number Number of child in my care (including area code): _____

b. My number Number of child in my care (including area code): _____

This is not a Court Order.



Automatic Orders That a Judge Can Make Right Away

29 No Guns, Other Firearms, or Ammunition

If the judge grants you a restraining order, the person in ② must sell or turn in any firearms that they have or control. The person in ② would also be prohibited from buying firearms and ammunition.

30 Cannot Look for Protected People

If the judge grants you a restraining order, the person in ② will not be allowed to look for the address or location of any person protected by the restraining order, unless the court finds good cause not to make this order.

31 Additional pages


If you used additional paper or forms, enter the number of extra pages attached to this form: 8

32 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: March 23, 2022

Victoria Garcia
Type or print your name


 Victoria Grace
Sign your name

Electronically signed pursuant to Code of Civil Proc. § 1010.6 and Cal. Rules of Court 2.257

33 Your lawyer's signature (if you have one)

Date: _____

Lawyer's name

 _____
Lawyer's signature


Your Next Steps

1 You must complete at least three additional forms:

- Form DV-110, Temporary Restraining Order (only items 1, 2 and 3)
- Form DV-109, Notice of Court Hearing (only items 1 and 2)
- Form CLETS-001, Confidential CLETS Information
- **If you are asking for child custody and visitation**, you must complete form DV-105, Request for Child Custody and Visitation Orders and form DV-140, Child Custody and Visitation Order.

- 2 Turn in your completed forms to the court. Find out when your forms will be ready for pick up.
- 3 Once you get your forms back from the court, have someone "serve" a copy of all forms on the person in ②. The sheriff or marshal can do this for free. Learn more about how to "serve" your papers and prepare for your court date: <https://selfhelp.courts.ca.gov/sheriff-serves-your-request-restraining-order>.
- 4 If you are asking for child support, spousal support, or lawyer's fees, you must also complete form FL-150, Income and Expense Declaration. If you are only asking for child support (item 23), you may be eligible to fill out a simpler form, FL-155. Read form DV-570 to see if you are eligible. Turn in your completed form to the court before your court date. You must also have someone mail or personally deliver a copy to the person in ②.

This is not a Court Order.

 Number: 1 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:39:34 PM
I think that Grace should be Garcia

This form is attached to (check one): form DV-100 form DV-120

1 Your name: Victoria Garcia Mom Dad Other*

2 Other parent's name: Grace Johnson Mom Dad Other*

*If Other, specify relationship to child: Respondent: Other mom.

3 Child Custody

I ask the court for custody as follows:

Legal Custody to (Person who makes decisions about health, education, and welfare):

Physical Custody to (Person you want the child to live with):

Table with columns: Child's Name, Date of Birth, Mom, Dad, Other (Legal Custody), Mom, Dad, Other (Physical Custody). Rows include Adrien Garcia and Liza Garcia.

Check here if you need more space. Attach a sheet of paper and write "DV-105, Child Custody" for a title.

4 Change Current Court Order

I want to change a current child custody or visitation court order.

Case Number (if you have it): County:

Explain your current order and why you want a change:

Check here if you need more space. Attach a sheet of paper and write "DV-105, Change Current Court Order" for a title.

5 Child's Address

Where has the child in (3)a lived for the last five years? List each city and state the child has lived in unless it is unknown to the other parent and you want to keep it confidential because of domestic violence or child abuse.

Table with columns: Child (3)a addresses (city and state), Child (3)a lived with (Mom, Dad, Other), Dates lived there. Includes entries for Confidential Los Angeles, CA and Los Angeles, CA.

Check here if you need more space. Attach a sheet of paper and write "DV-105, Child's Address" for a title.

This is not a Court Order.



6 Other Children's Addresses

- Check here if the other child's (or children's) address information is the same as listed in **5**.
- If it is different, check here. Attach a sheet of paper and write "DV-105, Other Children's Addresses" for a title. List other children's address information, including dates, and name of person(s) children lived with.

7 Other Custody Case

Were you involved in, or do you know of, any other custody case for any child listed in this form?

- No Yes *(If yes, fill out below and attach a copy of any custody or visitation orders if you have them):*

- a. Name of each child in other case: _____
- b. Type of case: Parentage (Paternity) Domestic Violence Child Support
 Juvenile/Dependency Guardianship Other (specify): _____
 Divorce
- c. I was a party witness Other (specify): _____
- d. Court (name): _____
 Address: _____ County: _____ State: _____
- e. Date of court order: _____
- f. Case number (if you have it): _____

8 Other People With or Claiming to Have Custody or Visitation Rights

Do you know of anyone who is not involved in this case who has or claims to have custody or visitation rights with any child listed on this form? No Yes *(If yes, fill out below.)*

That person (give name and address): _____

- has custody claims custody rights claims visitation rights

for these children (name of each child): _____

9 Visitation

I ask the court to order that the person in **2** have the following temporary visitation rights:

Check all that apply

- a. No visitation until the hearing
- b. No visitation after the hearing
- c. The following visitation until the hearing after the hearing
 - (1) **Weekends** (starting): _____ (The 1st weekend of the month is the 1st weekend with a Saturday.)
 1st 2nd 3rd 4th 5th weekend of month
 from _____ at _____ a.m. p.m. to _____ at _____ a.m. p.m.
 (day of week) (time) (day of week) (time)
 - (2) **Weekdays** (starting): _____
 from _____ at _____ a.m. p.m. to _____ at _____ a.m. p.m.
 (day of week) (time) (day of week) (time)

This is not a Court Order.



10 **Other Visitation**

I ask the court to make other visitation orders, like summer vacation, birthdays, and holidays. (List the orders you want on a separate sheet of paper. Write "DV-105, Other Visitation" for a title and attach it to this form.)

11 **Responsibility for Transportation**

(The parent will take or pick up the child or make arrangements for someone else to do so.)

I ask the court to order that:

- a. Mom Dad Other (name): _____ **take children to the visits.**
- b. Mom Dad Other (name): _____ **pick up children from the visits.**
- c. Drop-off / pick-up of children will be at (address): _____
- d. Check here if other arrangement. Attach a sheet of paper and write "DV-105, Responsibility for Transportation" for a title.

12 **Supervised Visitation**



- a. I ask that the visitation in **9** be supervised by:
 a professional supervisor a nonprofessional supervisor Other: _____
 (Name and telephone number, if known): _____
- b. I ask that the visitation in **10** be supervised by:
 a professional supervisor a nonprofessional supervisor Other: _____
 (Name and telephone number, if known): _____
- c. I ask that any costs for supervision be paid by:
 Mom _____ % Dad _____ % Other (name): _____ %

13 **Travel With Children**

I ask the court to order that:

- Mom Dad Other (name): Grace Johnson (Respondent) **must** have written permission from the other parent, or a court order, to take the children outside of:
- a. California
- b. County of (list): _____
- c. Other place(s) (list): _____


14 **Child Abduction Risk**

- I believe that there is a risk the other parent will take our child out of California and hide the child from me.
 (If you check this box you must fill out and attach form DV-108, Request for Order: No Travel with Children.)

Important Instructions

- You must tell the court if you find out any other information about a custody case in any court for the children listed on this form.
- If the court makes a temporary custody order, the parent receiving custody must not take the child out of California without a noticed hearing. (See Family Code, § 3063.)

This is not a Court Order.

 Number: 1 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:36:39 PM
This section should be completed since she is requesting in Item 10 that visits be supervised.

SHORT TITLE: Garcia v. Johnson	CASE NUMBER:
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ATTACHMENT (Number): Item 10 - Visitation

(This Attachment may be used with any Judicial Council form.)

Other Visitation Requests

Visitation Requested After the Hearing

After the hearing, I would like Respondent's visits to be supervised by my sister until the kids are in therapy and express a readiness to increase visits. Respondent can see them at dates and times that are agreed upon during mediation.

1



(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____

(Add pages as required)

Number: 1 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:37:42 PM

Does she have an idea of when and how often she would want the monitored visits to occur? If so, it can be helpful to specify even if they agree to something different in mediation.

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: Self-Represented Victoria Garcia 1234 Survivor Road APT#10 Los Angeles, CA 90012 ATTORNEY FOR (Name): Self-Represented	STATE BAR NUMBER	<i>Reserved for Clerk's File Stamp</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES		
COURTHOUSE ADDRESS: 111 North Hill Street, Los Angeles, CA 90012		
PETITIONER/PLAINTIFF: Victoria Garcia		
RESPONDENT/DEFENDANT: Grace Johnson		
FAMILY LAW CASE COVER SHEET AND CERTIFICATE OF GROUNDS FOR ASSIGNMENT TO DISTRICT		CASE NUMBER:

This form is required for all new Family Law cases filed in the Los Angeles Superior Court

This case cover sheet is required so that the court can assign your case to the correct district for filing and hearing. It satisfies the requirement for a certificate authorizing filing in the district, as set forth in Los Angeles Superior Court Rules 2.3 and 5.2. It must be completed and submitted to the court along with the original Complaint or Petition in all Family Law cases filed in any district of the Los Angeles Superior Court.

I. Consent to Electronic Notification (optional)	
<input checked="" type="checkbox"/> I agree to accept information electronically from the court at the following email address and/or cell phone number	
Email Address	Cell Phone (818) 818-8888

II. Address of Petitioner			
Street (including Apt. #)	City	State	Zip Code
1234 Survivor Road APT#10	Los Angeles	CA	90012

III. Address of <input checked="" type="checkbox"/> Respondent / <input type="checkbox"/> Joint Petitioner (Do not complete this section if filing a Minor's contract case)			
Street (including Apt. #)	City	State	Zip Code
1234 Survivor Road	Los Angeles	CA	90210

IV. Case Information			
Date of Marriage/Domestic Partnership <i>(if applicable)</i>	Date of Separation <i>(if applicable)</i>	Are there Minor Children Involved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		<i>If yes, indicate how many: 2</i>	
Parties agree to mediate: <i>(check one, if applicable)</i>	<input type="checkbox"/> Property and Support <input type="checkbox"/> Property Only <input type="checkbox"/> Support Only	Parties intend to proceed by: <i>(check one, if applicable)</i>	<input type="checkbox"/> Default <input type="checkbox"/> Stipulated Judgment <input type="checkbox"/> Use of private dispute resolution judge <input type="checkbox"/> Collaborative Law process
Do other parties need to be joined to the action to resolve the case? <input type="checkbox"/> Yes <input type="checkbox"/> No			

V. Interpreter Request

The Los Angeles Superior Court provides **free** interpreter services to participants in all family law cases. You may also request an interpreter online via the *Interpreter Request Portal* available at <http://www.lacourt.org>. Click the "Online Services" tab to access the *Interpreter Request Portal*.

Do you need an interpreter? Yes No *If yes, indicate the language requested: _____*

VI. District Assignment

Step 1. In the "Type of Action" column below, select **one** type of action which best describes the nature of this case. *For dissolution, nullity, and legal separation cases select one option each in sections A, B, and C.*

Step 2. Across from the "Type of Action" you selected, place an "X" in the column that corresponds to the reason for your choice of district. Note that you may only select from the boxes that are *not* shaded.

TYPE OF ACTION (check one)				May be filed in Central District	District where one or more of the parties resides	Child resides within the county	District where the Petitioner resides	Any court location
Dissolution, Nullity, and Legal Separation <i>(required: select one option each in sections A, B, and C below)</i>								
Section A <i>(check one)</i>	<input type="checkbox"/> Dissolution <input type="checkbox"/> Nullity <input type="checkbox"/> Legal Separation	Section B <i>(check one)</i>	<input type="checkbox"/> With Minor Children <input type="checkbox"/> Without Minor Children	Section C <i>(check one)</i>	<input type="checkbox"/> Domestic Partnership <input type="checkbox"/> Marriage			
Dept. of Child Support Services (DCSS)								
<input type="checkbox"/> DSU – Summons and Complaint [4814]								
<input type="checkbox"/> DSU – Statement – Registration of California Support Order [4811]								
<input type="checkbox"/> DSU – Petition – Uniform Support [4810]								
<input type="checkbox"/> DSU – Statement – Registration Out-of-State Support Order [4812]								
Establish Parental Relationship								
<input type="checkbox"/> Petition – Establish Parental Relationship [4040]								
<input type="checkbox"/> Petition – Special Immigrant Juvenile Status [4068]								
<input type="checkbox"/> Petition – Request – Set Aside Voluntary Dec. of Paternity [4054]								
Joint Petition for Summary Dissolution								
<input type="checkbox"/> Marriage [4041]				<input type="checkbox"/> Domestic Partnership [4042]				
Surrogacy <i>(if selected, also complete Section VIII, "Surrogacy Case Jurisdiction", on page 3 of this form)</i>								
<input type="checkbox"/> Surrogacy – Stipulation and Order [4324]								
Other Family Law								
<input type="checkbox"/> Petition – Custody and Support of Minor Child [4032]								
<input type="checkbox"/> Registration of Out-of-State Custody Order [4052]								
<input type="checkbox"/> Statement – Registration of California Support Order [4190]								
<input type="checkbox"/> Petition – Grandparent/Third Party Visitation [4327]								
<input type="checkbox"/> Request – Release Confidential Marriage License/Certificate [4407]								
<input type="checkbox"/> Petition – Minor’s Contract (FC § 6751) [4047]								
<input type="checkbox"/> Petition – Habeas Corpus – Family Law [4011]								
<input type="checkbox"/> Custody Order – Juvenile Final Judgment – Closing Order [174]								
<input type="checkbox"/> Petition – Elder/Dependent Adult Abuse [226]								
<input type="checkbox"/> Order – Register Out-of-State/Tribal Court Restraining Order [4325]								
<input type="checkbox"/> Petition – Family Law Other [4329]								
Consent for Minor to Marry/Establish Domestic Partnership								
<input type="checkbox"/> Marriage [4031]				<input type="checkbox"/> Domestic Partnership [4030]				
Restraining Orders/Domestic Violence (DV) Prevention <i>Note: Use Civil Case Cover Sheet (LA CIV109) for all Civil Restraining Orders</i>								
<input checked="" type="checkbox"/> DV Prevention <i>with</i> Minor Children [4038]								X
<input type="checkbox"/> DV Prevention <i>without</i> Minor Children [4039]								

VII. Address of Minor Child(ren) (if known)

Complete this section only if you have selected "Child Resides within the County" as an applicable reason for case assignment in Section V above. Do not complete this section if this case falls under Family Code § 6751.

Street (including Apt. #)	City	State	Zip Code
---------------------------	------	-------	----------

VIII. Surrogacy Case Jurisdiction – Required only for Surrogacy actions (Family Code § 7962)

- Please select the appropriate grounds for jurisdiction in Los Angeles County:
- Child is anticipated to be born in Los Angeles County
 - Intended parent or intended parents reside in Los Angeles County
 - Surrogate resides in Los Angeles County
 - Assisted reproduction agreement for gestational carriers was executed in Los Angeles County
 - Medical procedures pursuant to the agreement are to be performed in Los Angeles County

IX. Certification / Declaration of Assignment

The undersigned hereby certifies and declares that the above entitled matter is properly filed for assignment to the: (check one option below)


- | | | |
|---|--|------------------------------------|
| <input checked="" type="checkbox"/> Central | <input type="checkbox"/> East | <input type="checkbox"/> North |
| <input type="checkbox"/> North Valley | <input type="checkbox"/> Northeast | <input type="checkbox"/> Northwest |
| <input type="checkbox"/> South | <input type="checkbox"/> South Central | <input type="checkbox"/> Southeast |
| <input type="checkbox"/> Southwest | <input type="checkbox"/> West (Domestic Violence Only) | |

District of the Los Angeles Superior Court under Code of Civil Procedure § 392 et seq., 2300 et seq. of the Family Code, and Local Rules 2.3 and 5.2 of this court for reason checked above. I certify and declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: March 23, 2022

Victoria Grace  ¹
(SIGNATURE OF ATTORNEY/PARTY WITHOUT ATTORNEY)

Electronically signed pursuant to Code of Civil Proc. § 1010.6 and Cal. Rules of Court 2.257

 Number: 1 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:38:51 PM
This says Victoria "Grace" and I believe it should be "Garcia."

NAME, ADDRESS AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: Self-Represented Victoria Garcia 1234 Survivor Road APT#10 Los Angeles, CA 90012 ATTORNEY FOR (NAME): Self-Represented		STATE BAR NUMBER	<i>Reserved for Clerk's File Stamp</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			
COURT HOUSE ADDRESS: 111 North Hill Street, Los Angeles, CA 90012			
PETITIONER / PLAINTIFF: Victoria Garcia			
RESPONDENT / DEFENDANT: Grace Johnson			
CHILD'S NAME:	CHILD'S DATE OF BIRTH:	CASE NUMBER:	
DECLARATION RE: NOTICE OF EX PARTE REQUEST (NO NOTICE GIVEN) (Temporary Restraining Order)			RELATED CASES (IF ANY):

I, Victoria Garcia, declare that:
(PRINT NAME)

1) I did not give notice to the other party in this action because:

- I was afraid that the violence would reoccur when I gave notice that I was asking for these orders.
- I was afraid that the other party would take the children out of the area before the order could be granted and served.
- I believe that giving notice would make the orders useless because the other party would:

2) I attempted and was unable to inform _____ or his/her attorney _____ that I would be seeking a temporary restraining order. My attempts included _____

3) Other reason:

I declare that the above is true and correct, and that I executed this declaration at Los Angeles, California

March 23, 2022
DATE

Victoria Grace  ¹
SIGNATURE OF DECLARANT:

Electronically signed pursuant to Code of Civil Proc. § 1010.6 and Cal. Rules of Court 2.257

**California Law Enforcement Telecommunications System (CLETS)
Information Form**

- This form is submitted with the initial filing (date): _____
- This is an amended form (date): _____

Important: This form MUST NOT become part of the public court file. It is confidential and private.

Fill out as much of this form as you can and give it to the court clerk. If the court issues a restraining order, this form will provide law enforcement with information that will help them enforce it. If any of this information changes, fill out a new (amended) form.

Case Number (if you know it): _____
--

1 Person to Be Protected (Name): Victoria Garcia

Sex: M F Height: 5' 7" Weight: 130 lbs. Race: Hispanic

Hair Color: Blonde Eye Color: Brown Age: 47 years Date of Birth: July 8, 1974

Mailing Address (listed on restraining order): 1234 Survivor Road APT#10

City: Los Angeles State: CA Zip: 90012 Telephone (optional): (818) 818-8888

Vehicle (Type, Model, Year): 2019 Toyota Corolla (License Number and State): 6PET123-CA

2 Person to Be Restrained (Name): Grace Johnson

Sex: M F Height: 6' 0" Weight: 150 lbs. Race: White

Hair Color: Black Eye Color: Green Age: 47 Date of Birth: 7/1/1974

Residence Address: 1234 Survivor Road

City: Los Angeles State: CA Zip: 90210 Telephone: (818) 777-7777

Business Address: 855 N Vermont Ave

City: Los Angeles State: CA Zip: 90029 Telephone: (323)953-4000

Employer: Los Angeles Community College

Occupation/Title: Security Guard Work Hours: M-F 8AM-5PM

Driver's License Number and State: Unknown (CA) Social Security Number: 666-66-6666

Vehicle (Type, Model, Year): 2020 Toyota Camry (License Number and State): 77LEGO

Describe any marks, scars, or tattoos: tattoo sleeves

Other names used by the restrained person: None known

3 Guns or Firearms Describe any guns or firearms that you believe the person in (2) owns or has access to (Number, types, and locations):

4 Other People to Be Protected

Name	Date of Birth	Sex	Race	Relation to Person in (1)
<u>Adrien Garcia</u>	<u>07/07/07</u>	<u>M</u>	<u>other</u>	<u>Child</u>
<u>Liza Garcia</u>	<u>10/10/10</u>	<u>F</u>	<u>other</u>	<u>Child</u>

Additional persons to be protected are listed on Attachment 4.

This is not a Court Order—Do not place in court file.

SHORT TITLE: Garcia v. Johnson	CASE NUMBER:
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ATTACHMENT (Number): CLETS-001 Item 4 - Other People to Be Protected

(This Attachment may be used with any Judicial Council form.)

Other People to Be Protected

Full Name	Date of Birth	Sex	Race	How are they related to you?
Gloria Garcia	08/08/54	F	Hispanic	Aunt

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____

(Add pages as required)

PARTY WITHOUT ATTORNEY OR ATTORNEY		STATE BAR NUMBER:	<i>FOR COURT USE ONLY</i>
NAME: Victoria Garcia			
FIRM NAME:			
STREET ADDRESS: 1234 Survivor Road APT#10			
CITY: Los Angeles	STATE: CA	ZIP CODE: 90012	
TELEPHONE NO.: (818) 818-8888	FAX NO.:		
E-MAIL ADDRESS:			
ATTORNEY FOR (name): Self-Represented			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			
STREET ADDRESS: 111 North Hill Street			
MAILING ADDRESS:			
CITY AND ZIP CODE: Los Angeles, CA 90012			
BRANCH NAME: CENTRAL DISTRICT			
PETITIONER: Victoria Garcia			
RESPONDENT: Grace Johnson			
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: **Children's Hospital Los Angeles**
- b. Employer's address: **4650 Sunset Blvd, Los Angeles, CA 90027**
- c. Employer's phone number: **(323) 660-2450**
- d. Occupation: **Administrator**
- e. Date job started: **January 2017**
- f. If unemployed, date job ended:
- g. I work about **40** hours per week.
- h. I get paid \$ **3,500** 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): **47**
- 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): **4** Degree(s) obtained (specify): **Sociology**
- d. Number of years of graduate school completed (specify): **0** 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): **2021**
- 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): \$ **3,125**
This estimate is based on (explain): **I see Respondent's W-2 form.**

(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: **March 23, 2022**

Victoria Garcia
(TYPE OR PRINT NAME)

Victoria Grace
(SIGNATURE OF DECLARANT)

Electronically signed pursuant to Code of Civil Proc. § 1010.6 and Cal. Rules of Court 2.257 Page 1 of 4

Number: 1 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:41:17 PM
Please specify how often the \$3,500 is paid (per month, per week, per hour)

Number: 2 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:41:57 PM
Please specify the type of degree in Sociology, e.g. AA, BA, BS, etc.

Number: 3 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:42:38 PM
Please specify the name of the person with whom she filed taxes jointly.

Number: 4 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:42:58 PM
Please specify in which state she files her tax returns

Number: 5 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:43:18 PM
Please specify how many exemptions are claimed on her tax returns.

Number: 6 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:43:50 PM
I believe these should say Victoria "Garcia"

PETITIONER: Victoria Garcia RESPONDENT: Grace Johnson 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).....	\$ 3,500	3,500
b. Overtime (gross, before taxes).....	\$ 0	0
c. Commissions or bonuses.....	\$ 0	0
d. Public assistance (for example: TANF, SSI, GA/GR) <input type="checkbox"/> currently receiving	\$ 0	0
e. Spousal support <input type="checkbox"/> from this marriage <input type="checkbox"/> from a different marriage <input type="checkbox"/> federally taxable*	\$ 0	0
f. Partner support <input type="checkbox"/> from this domestic partnership <input type="checkbox"/> from a different domestic partnership	\$ 0	0
g. Pension/retirement fund payments.....	\$ 0	0
h. Social Security retirement (not SSI).....	\$ 0	0
i. Disability: <input type="checkbox"/> Social Security (not SSI) <input type="checkbox"/> State disability (SDI) <input type="checkbox"/> Private insurance	\$ 0	0
j. Unemployment compensation.....	\$ 0	0
k. Workers' compensation.....	\$ 0	0
l. Other (military allowances, royalty payments) (specify):	\$ 0	0

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

a. Dividends/interest.....	\$ 0	0
b. Rental property income.....	\$ 0	0
c. Trust income.....	\$ 0	0
d. Other (specify):	\$ 0	0

7. **Income from self-employment, after business expenses for all businesses**..... \$ 0 0

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.....	\$ 30
b. Required retirement payments (not Social Security, FICA, 401(k), or IRA).....	\$ 100
c. Medical, hospital, dental, and other health insurance premiums (total monthly amount).....	\$ 216
d. Child support that I pay for children from other relationships.....	\$ 0
e. Spousal support that I pay by court order from a different marriage <input type="checkbox"/> federally tax deductible*.....	\$ 0
f. Partner support that I pay by court order from a different domestic partnership.....	\$ 0
g. Necessary job-related expenses not reimbursed by my employer (attach explanation labeled "Question 10g").....	\$ 0

11. **Assets**

	Total
a. Cash and checking accounts, savings, credit union, money market, and other deposit accounts.....	\$ 10,000
b. Stocks, bonds, and other assets I could easily sell.....	\$ 0
c. All other property, <input checked="" type="checkbox"/> real and <input checked="" type="checkbox"/> personal (estimate fair market value minus the debts you owe).....	\$ 0

* 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: Victoria Garcia RESPONDENT: Grace Johnson 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. Adrien Garcia	14	Child	0.00	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b. Liza Garcia	11	Child	0.00	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
c. Grace Johnson	47	Spouse	3,125.00	<input checked="" 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 checked="" type="checkbox"/> Rent or <input type="checkbox"/> mortgage..... \$ <u>2,500</u> If mortgage: (a) average principal: \$ <u>0</u> (b) average interest: \$ <u>0</u> (2) Real property taxes..... \$ <u>0</u> (3) Homeowner's or renter's insurance (if not included above)..... \$ <u>0</u> (4) Maintenance and repair..... \$ <u>0</u> b. Health-care costs not paid by insurance..... \$ <u>0</u> c. Child care..... \$ <u>800</u> d. Groceries and household supplies..... \$ <u>400</u> e. Eating out..... \$ <u>60</u> f. Utilities (gas, electric, water, trash)..... \$ <u>115</u> g. Telephone, cell phone, and e-mail..... \$ <u>100</u>	h. Laundry and cleaning..... \$ <u>50</u> i. Clothes..... \$ <u>50</u> j. Education..... \$ <u>0</u> k. Entertainment, gifts, and vacation..... \$ <u>50</u> l. Auto expenses and transportation (insurance, gas, repairs, bus, etc.)..... \$ <u>220</u> m. Insurance (life, accident, etc.; do not include auto, home, or health insurance)..... \$ <u>0</u> n. Savings and investments..... \$ <u>0</u> o. Charitable contributions..... \$ <u>0</u> p. Monthly payments listed in item 14 (itemize below in 14 and insert total here)..... \$ <u>500</u> q. Other (specify): \$ <u>0</u> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> r. TOTAL EXPENSES (a-q) (do not add in the amounts in a(1)(a) and (b)) \$ <u>4,845</u> </div> s. Amount of expenses paid by others \$ <u>2,422.5</u>
--	--

14. Installment payments and debts not listed above

Paid to	For	Amount	Balance	Date of last payment
Toyota Financial Services	Car loan or lease payment	\$ 400	\$ 18,000	February 2022
American Express	Credit card	\$ 100	\$ 1,000	February 2022
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

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: Victoria Garcia RESPONDENT: Grace Johnson 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

-  1. I have (specify number): 2 children under the age of 18 with the other parent in this case.
2. The children spend 70 percent of their time with me and 30 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.....	\$ 800
b. Children's health care not covered by insurance.....	\$ 0
c. Travel expenses for visitation.....	\$ 0
d. Children's educational or other special needs (specify below):.....	\$ 0

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.....	\$ 0	_____
b. Major losses not covered by insurance (examples: fire, theft, other insured loss).....	\$ 0	_____
c. (1) Expenses for my minor children who are from other relationships and are living with me.....	\$ 0	_____
(2) Names and ages of those children (specify):		

(3) Child support I receive for those children..... \$ 0

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):

Number: 1 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:49:51 PM

How did she arrive at a 70/30 timeshare? Is she planning to request that Respondent have visits with the children during 30% of the time? If she is requesting monitored visits, this is probably much lower. Maybe she can leave the percentages blank and just explain that she is requesting monitored visits and how often instead?

Number: 2 Author: Amandaj Subject: Sticky Note Date: 3/25/2022 4:50:38 PM

Please specify whether she has health insurance for the children available through her job and if so, please provide the insurance info and cost.

Clerk stamps date here when form is filed.

Empty box for clerk stamping date.

Fill in court name and street address:

Superior Court of California, County of LOS ANGELES 111 North Hill Street Los Angeles, CA 90012 CENTRAL DISTRICT

Court fills in case number when form is filed.

Case Number:

1 Name of Person Asking for Order:

Victoria Garcia

Your lawyer in this case (if you have one):

Name: Self-Represented State Bar No.:

Firm Name:

Address (If you have a lawyer for this case, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, give a different mailing address instead. You do not have to give your telephone, fax, or e-mail.)

Address: 1234 Survivor Road APT#10

City: Los Angeles State: CA Zip: 90012

Telephone: (818) 818-8888 Fax:

E-Mail Address:

2 Name of Person to Be Restrained:

Grace Johnson

The court will fill out the rest of this form.

3 Notice of Hearing

A court hearing is scheduled on the request for restraining orders against the person in 2:

Hearing Date: Date: Time: Dept.: Room: Name and address of court if different from above:

4 Temporary Restraining Orders (Any orders granted are attached on form DV-110.)

a. Temporary Restraining Orders for personal conduct and stay-away orders as requested in form DV-100, Request for Domestic Violence Restraining Order, are (check only one box below):

- (1) All GRANTED until the court hearing.
(2) All DENIED until the court hearing. (Specify reasons for denial in b, below.)
(3) Partly GRANTED and partly DENIED until the court hearing. (Specify reasons for denial in b, below.)

b. Reasons for denial of some or all of those personal conduct and stay-away orders as requested in form DV-100, Request for Domestic Violence Restraining Order, are:

- (1) The facts as stated in form DV-100 do not show reasonable proof of a past act or acts of abuse. (Family Code, §§ 6320 and 6320.5.)
(2) The facts do not describe in sufficient detail the most recent incidents of abuse, such as what happened, the dates, who did what to whom, or any injuries or history of abuse.
(3) Further explanation of reason for denial, or reason not listed above:



5 Confidential Information Regarding Minor

- a. A Request to Keep Minor's Information Confidential (form DV-160) was made and **GRANTED** (see form DV-165, Order on Request to Keep Minor's Information Confidential, served with this form.)
- b. **If the request was granted, the information described on the order (form DV-165, item 7) must be kept CONFIDENTIAL. The disclosure or misuse of the information is punishable as a sanction, with a fine of up to \$1,000 or other court penalties.**

6 Service of Documents by the Person in 1

At least five _____ days before the hearing, someone age 18 or older—not you or anyone to be protected—must personally give (serve) a court file-stamped copy of this form (DV-109, Notice of Court Hearing) to the person in 2 along with a copy of all the forms indicated below:

- a. DV-100, Request for Domestic Violence Restraining Order (file-stamped)
- b. DV-110, Temporary Restraining Order (file-stamped) **IF GRANTED**
- c. DV-120, Response to Request for Domestic Violence Restraining Order (blank form)
- d. DV-120-INFO, How Can I Respond to a Request for Domestic Violence Restraining Order?
- e. DV-250, Proof of Service by Mail (blank form)
- f. DV-170, Notice of Order Protecting Information of a Minor, and DV-165, Order on Request to Keep Minor's Information Confidential (file-stamped), **IF GRANTED**
- g. Other (specify): _____

Date: _____

Judicial Officer

Right to Cancel Hearing: Information for the Person in 1

- If item 4a(2) or 4a(3) is checked, the judge has denied some or all of the temporary orders you requested until the court hearing. The judge may make the orders you want after the court hearing. You can keep the hearing date, or you can cancel your request for orders so there is no court hearing.
- If you want to cancel the hearing, use form DV-112, Waiver of Hearing on Denied Request for Temporary Restraining Order. Fill it out and file it with the court as soon as possible. You may file a new request for orders, on the same or different facts, at a later time.
- If you cancel the hearing, do not serve the documents listed in item 6 on the other person.
- If you want to keep the hearing date, you must have all of the documents listed in item 6 served on the other person within the time listed in item 6.
- At the hearing, the judge will consider whether denial of any requested orders will jeopardize your safety and the safety of children for whom you are requesting custody or visitation.
- You must come to the hearing if you want the judge to make restraining orders or continue any orders already made. If you cancel the hearing or do not come to the hearing, any restraining orders made on form DV-110 will end on the date of the hearing.



To the Person in ① :

- The court cannot make the restraining orders after the court hearing unless the person in ② has been personally given (served) a copy of your request and any temporary orders. To show that the person in ② has been served, the person who served the forms must fill out a proof of service form. Form DV-200, *Proof of Personal Service*, may be used.
- For information about service, read form DV-200-INFO, *What Is "Proof of Personal Service"?*
- If you are unable to serve the person in ② in time, you may ask for more time to serve the documents. Read form DV-115-INFO, *How to Ask for a New Hearing Date*.

To the Person in ② :

- If you want to respond in writing, mail a copy of your completed form DV-120, *Response to Request for Domestic Violence Restraining Order*, to the person in ① and file it with the court. You cannot mail form DV-120 yourself. Someone age 18 or older — **not you** — must do it.
- To show that the person in ① has been served by mail, the person who mailed the form must fill out a proof of service form. Form DV-250, *Proof of Service by Mail*, may be used. File the completed form with the court before the hearing and bring a copy with you to the hearing.
- For information about responding to a restraining order and filing your answer, read form DV-120-INFO, *How Can I Respond to a Request for Domestic Violence Restraining Order?*
- Whether or not you respond in writing, go to the hearing if you want the judge to hear from you before making an order. You may tell the judge why you agree or disagree with the orders requested. You may bring witnesses and other evidence.
- **At the hearing, the judge may make restraining orders against you that could last up to five years.**
- **The judge may also make other orders about your children, child support, spousal support, money, and property and may order you to turn in or sell any firearms that you own or possess.**

**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 for *Request for Accommodations by Persons with Disabilities and Response* (form MC-410). (Civ. Code, § 54.8.)

(Clerk will fill out this part.)

—Clerk's Certificate—

Clerk's Certificate
[seal]

I certify that this *Notice of Court Hearing* is a true and correct copy of the original on file in the court.

Date: _____ Clerk, by _____, Deputy

Clerk stamps date here when form is filed.

Instruction: The person asking for a restraining order must complete items 1, 2, and 3 only. The court will complete the rest of this form.

1 Protected Person (name): Victoria Garcia

2 Restrained Person

*Full Name: Grace Johnson

*Gender: M F Nonbinary

*Age: 47 (Give estimate, if age unknown.)

Date of Birth: 7/1/1974 Height: 6' 0" Weight: 150 lbs.

Hair Color: Black Eye Color: Green

*Race: White

Relationship to person in 1: Parents together of child/ren, Married, Live Together

Address of restrained person: 1234 Survivor Road

City: Los Angeles State: CA Zip: 90210

Type, number, and location of firearms or ammunition:

(Information that has a star (*) next to it is required to add this order into a California police database. Give all the information you know.)

Fill in court name and street address:

Superior Court of California, County of LOS ANGELES 111 North Hill Street Los Angeles, CA 90012 CENTRAL DISTRICT

Court fills in case number when form is filed.

Case Number:

3 Other Protected People

In addition to the person named in 1, the people listed below are protected by the orders listed in 6 through 9.

Table with 3 columns: Full name, Relationship to person in 1, Age. Rows include Adrien Garcia (Child, 14), Liza Garcia (Child, 11), and Gloria Garcia (Aunt, 67).

Check here if you need to list more people. List them on a separate piece of paper, write "DV-110, Other Protected People" at the top, and attach it to this form.

(The court will complete the rest of this form)

4 Your Hearing Date (Court Date)



This order expires at the end of the hearing listed below:

Hearing Date: Time: a.m. p.m.

This is a Court Order.



This order must be enforced throughout the United States. See page 5.

To the Person in ②

The judge has granted temporary orders. See items ⑤ through ⑱.

- If you do not obey these orders, you can be charged with a crime, go to jail or prison, and/or pay a fine.
- It is a felony to take or hide a child in violation of this order.

⑤ No Guns, Other Firearms, or Ammunition

- You cannot own, possess, have, buy or try to buy, receive or try to receive, or in any other way get guns, other firearms, or ammunition.
 - **Within 24 hours of receiving this order, you must** sell to or store with a licensed gun dealer, or turn in to a law enforcement agency, any guns or other firearms you have in your immediate possession or control.
 - **Within 48 hours of receiving this order,** you must file a receipt with the court that proves guns have been turned in or sold. (You may use [form DV-800, Proof of Firearms Turned In, Sold, or Stored](#), for the receipt.)
- The court has received information that you own or possess firearm(s) or ammunition.

⑥ Cannot Look for Protected People

You must not take any action to look for any person protected by this order, including their addresses or locations.

- If checked, this order was **not granted** because the judge found good cause not to make the order.

⑦ Order to Not Abuse Not requested Denied until the hearing Granted as follows:

You must not do the following things to the person in ① and any person listed in ③:

- Harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, molest, destroy personal property, keep under surveillance, impersonate (on the internet, electronically, or otherwise), block movements, annoy by phone or other electronic means (including repeatedly contact), or disturb the peace.
- "Disturb the peace" means to destroy someone's mental or emotional calm. This can be done directly or indirectly, such as through someone else. This can also be done in any way, such as by phone, over text, or online. Disturbing the peace includes coercive control.
- "Coercive control" means a number of acts that unreasonably limit the free will and individual rights of any person protected by this restraining order. Examples include isolating them from friends, relatives, or other support; keeping them from food or basic needs; controlling or keeping track of them, including their movements, contacts, actions, money, or access to services; and making them do something by force, threat, or intimidation, including threats based on actual or suspected immigration status.

This is a Court Order.



8 No-Contact Order Not requested Denied until the hearing Granted as follows:

a. You must **not contact** the person in **1** the persons in **3**
directly or indirectly, by any means, including by telephone, mail, email, or other electronic means.

b. Exception to 8a:

(1) You may have brief and peaceful contact with the person in **1** only to communicate about your children for court-ordered visits.

(2) You may have contact with your children only during court-ordered contact or visits.

(3) Other (*explain*): _____

c. Peaceful written contact through a lawyer or process server or another person for service of legal papers related to a court case is allowed and does not violate this order.

9 Stay-Away Order Not requested Denied until the hearing Granted as follows:

a. You must stay at least (*specify*): _____ yards away from (*check all that apply*):

Person in **1**.

School of person in **1**.

Home of person in **1**.

Persons in **3**.

Job or workplace of person in **1**.

Children's school or child care.

Vehicle of person in **1**.

Other (*explain*): _____

b. Exception to 9a:

The stay-away orders do not apply:

(1) For you to briefly and peacefully exchange your children for court-ordered visits.

(2) For you to visit with your children for court-ordered contact or visits.

(3) Other (*explain*): _____

10 Order to Move Out Not requested Denied until the hearing Granted as follows:

You must take only personal clothing and belongings needed until the hearing and move out immediately from (*address*): _____

11 Other Orders Not requested Denied until the hearing Granted as follows:

12 Child Custody and Visitation Not requested Denied until the hearing Granted as follows:

Child custody and visitation are ordered on the attached form DV-140, Child Custody and Visitation Order, or (*list other form*): _____. The parent with temporary custody of the child must not remove the child from California without permission from the court.

This is a Court Order.



13 Protect Animals Not requested Denied until the hearing Granted as follows:

- a. You must stay at least _____ yards away from the animals listed below.
- b. You must not take, sell, hide, molest, attack, strike, threaten, harm, get rid of, transfer, or borrow against the animals.
- c. The person in ① is given the sole possession, care, and control of the animals listed below.

Name (or other way to ID animal)	Type of animal	Breed (if known)	Color
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

14 Control of Property Not requested Denied until the hearing Granted as follows:

Until the hearing, **only** the person in ① can use, control, and possess the following property:

15 Health and Other Insurance Not requested Denied until the hearing Granted as follows:

The person in ① in ② is ordered **not** to cash, borrow against, cancel, transfer, dispose of, or change the beneficiaries of any insurance or coverage held for the benefit of the parties—or their children, if any—for whom support may be ordered, or both.

16 Record Communications Not requested Denied until the hearing Granted as follows:

The person in ① may record communications made by the person in ② that violate this order.

17 Property Restraint Not requested Denied until the hearing Granted as follows:

The person in ① in ② must not transfer, borrow against, sell, hide, or get rid of or destroy any property, including animals, except in the usual course of business or for necessities of life. In addition, each person must notify the other of any new or big expenses and explain them to the court. (If the court granted ⑧, the person in ② must not contact the person in ①. To notify the person in ① of new or big expenses, have a server mail or personally give the information to the person in ① or contact their lawyer, if they have one.)

18 Pay Debts Owed for Property Not requested Denied until the hearing Granted as follows:

The person in ② must make these payments until this order ends:

Pay to: _____ For: _____ Amount: \$ _____ Due date: _____

Pay to: _____ For: _____ Amount: \$ _____ Due date: _____

Pay to: _____ For: _____ Amount: \$ _____ Due date: _____

This is a Court Order.



19 Orders That May Be Made at the Hearing Date (Court Date)

If the person in ① checked any of these orders on form DV-100, a judge could grant them at your court date.

- Child Support
- Spousal Support
- Lawyer’s Fees and Costs
- Pay Expensed Caused by Abuse
- Batterer Intervention Program
- Transfer of Wireless Phone Account

20 No Fee to Serve (Notify) Restrained Person

The sheriff or marshal will serve this order for free.
Bring a copy of all the papers that you need to be served to the sheriff or marshal.

21 Attached pages

Number of pages attached to this seven-page form: _____

Judge's Signature

Date: _____

Judge or Judicial Officer

Certificate of Compliance With VAWA

This temporary protective order meets all “full faith and credit” requirements of the Violence Against Women Act, 18 U.S.C. § 2265 (1994) (VAWA), upon notice of the restrained person. This court has jurisdiction over the parties and the subject matter; the restrained person has been or will be afforded notice and a timely opportunity to be heard as provided by the laws of this jurisdiction. **This order is valid and entitled to enforcement in each jurisdiction throughout the 50 states of the United States, the District of Columbia, all tribal lands, and all U.S. territories, commonwealths, and possessions and shall be enforced as if it were an order of that jurisdiction.**

This is a Court Order.



Warnings and Notices to the Restrained Person in ②

Your Address to Receive Court Orders

If the judge makes a restraining order at the hearing (court date), which has the same orders as in this Temporary Restraining Order, you will get a copy of that order by mail at your last known address, which is written in ② on page 1. If your address was not listed on this form or is incorrect, contact the court. If you did not go to your court date and want to know if the judge granted a restraining order against you, contact the court.

Child Custody, Visitation, and Support

- **Child custody and visitation:** If you do not go to your hearing (court date), the judge can make custody and visitation orders for your children without hearing from you.
- **Child support:** The judge can order child support based on the income of both parents. The judge can also have that support taken directly from a parent's paycheck. Child support can be a lot of money, and usually you have to pay until the child is age 18. File and serve form FL-150, *Income and Expense Declaration*, or form FL-155, *Financial Statement (Simplified)*, if you want the judge to have information about your finances. Otherwise, the court may make support orders without hearing from you.
- **Spousal support:** File and serve form FL-150, *Income and Expense Declaration*, so the judge will have information about your finances. Otherwise, the court may make support orders without hearing from you.

Instructions for Law Enforcement

This order is effective when made. It is enforceable by any law enforcement agency that has received the order, is shown a copy of the order, or has verified its existence on the California Law Enforcement Telecommunications System (CLETS). If the law enforcement agency has not received proof of service on the restrained person, and the restrained person was not present at the court hearing, the agency shall advise the restrained person of the terms of the order and then shall enforce it. Violations of this order are subject to criminal penalties.

Arrest Required if Order Is Violated

If an officer has probable cause to believe that the restrained person had notice of the order and has disobeyed the order, the officer must arrest the restrained person. (Penal Code, §§ 836(c)(1), 13701(b).) A violation of the order may be a violation of Penal Code section 166 or 273.6.

If the Protected Person Contacts the Restrained Person

Even if the protected person invites or consents to contact with the restrained person, the orders remain in effect and must be enforced. The protected person cannot be arrested for inviting or consenting to contact with the restrained person. The orders can be changed only by another court order. (Penal Code, § 13710(b).)

This is a Court Order.



Conflicting Orders—Priorities for Enforcement

If more than one restraining order has been issued protecting the protected person from the restrained person, the orders must be enforced according to the following priorities (see Penal Code, § 136.2, and Family Code, §§ 6383(h), 6405(b)):

1. **EPO:** If one of the orders is an *Emergency Protective Order* (form EPO-001), and it is more restrictive than other restraining or protective orders, it has precedence in enforcement over all other orders.
2. **No-Contact Order:** If there is no EPO, a no-contact order that is included in a restraining or protective order has precedence in enforcement over any other restraining or protective order.
3. **Criminal Order:** If none of the orders includes a no-contact order, a domestic violence protective order issued in a criminal case takes precedence in enforcement over any conflicting civil court order. Any nonconflicting terms of the civil restraining order remain in effect and enforceable.
4. **Family, Juvenile, or Civil Order:** If more than one family, juvenile, or other civil restraining or protective order has been issued, the one that was issued last must be enforced.

Child Custody and Visitation

- The custody and visitation orders are on form DV-140. They are sometimes also written on additional pages or referenced in DV-140 or other orders that are not part of the restraining order.
- At items 8b(1) or 9b(1) of this order, the judge may allow the person in (2) to have brief and peaceful contact with the person in (1), as needed to follow court-ordered visits. Conduct of the person in (2) that is **not** brief and peaceful is a violation of this order.
- **Forms DV-100 and DV-105 are not orders. Do not enforce them.**

(The clerk will fill out this part.)

Clerk's Certificate
[seal]

—Clerk's Certificate—

I certify that this *Temporary Restraining Order* is a true and correct copy of the original on file in the court.

Date: _____ Clerk, by _____, Deputy

This is a Court Order.

This form is attached to (check one): DV-110 DV-130

1 Name of Protected Person: Victoria Garcia Mom Dad Other*

2 Other Parent's Name: Grace Johnson Mom Dad Other*

* If Other, specify relationship to child: Respondent: Other mom.

The Court Orders:

3 Child Custody is ordered as follows:

Legal Custody to: (Person who makes decisions about health, education. Check at least one.)

Physical Custody to: (Person the child lives with. Check at least one.)

Table with columns: Child's Name, Date of Birth, Mom, Dad, Other*, Mom, Dad, Other*. Rows include Adrien Garcia and Liza Garcia.

If more children, check here. Attach a sheet of paper and write "DV-140, Child Custody" for a title.

* If Other, specify relationship to child and name of person:

4 Child Visitation is ordered as follows:

- a. No visitation to Mom Dad Other (name): Grace Johnson
b. See the attached - page document, dated:
c. The parties must go to mediation at:
d. Until the next court order, visitation for Mom Dad Other (name): will be:

(1) Weekends (starting): (The 1st weekend of the month is the 1st weekend with a Saturday.)
1st 2nd 3rd 4th 5th weekend of month
from at a.m. p.m. to at a.m. p.m.

(2) Weekdays (starting):
from at a.m. p.m. to at a.m. p.m.

(3) Other Visitation

Check here and attach a sheet of paper if there are other visitation days and times, like holidays, birthdays, sports events. List dates and times. Write "DV- 140, Other Visitation" for a title.

5 Supervised Visitation or Exchange

Visits and/or exchanges of children are supervised as specified on Form DV-150, Supervised Visitation and Exchange Order.

This is a Court Order.

6 **Responsibility for Transportation for Visitation**

“Responsibility for transportation” means the parent will take or pick up the child or make arrangements for someone else to do so.

- a. Mom Dad Other (name): _____ **take children to** the visits.
 b. Mom Dad Other (name): _____ **pick up children from** the visits.
 c. Drop-off / pick-up of children will be at (address): _____

7 **Travel with Children**

Mom Dad Other (name): Grace Johnson (Respondent) **must** have written permission from the other parent, or a court order, to take the children outside of:

- a. The State of California
 b. The United States of America
 c. Other place(s) (list): _____

8 **Child Abduction**

There is a risk that one of the parents will take the children out of California without the other parent’s permission. The orders in Form DV-145, *Order: No Travel with Children*, are attached and must be obeyed. (Fill out and attach Form DV-145 to this form.)

9 **Other Orders**

Check here and attach any other orders to this form. Write “DV-140, Other Orders” as a title.

10 **Jurisdiction**

This court has jurisdiction to make child custody orders in this case under the Uniform Child Custody Jurisdiction and Enforcement Act (part 3 of the California Family Code starting with § 3400).

11 **Notice and Opportunity to Be Heard**

The responding party was given reasonable notice and an opportunity to be heard as provided by the laws of the State of California.

12 **Country of Habitual Residence**

The country of habitual residence of the child or children in this case is The United States of America or Other (specify): _____.

13 **Penalties for Violating This Order**

If you violate this order, you may be subject to civil or criminal penalties, or both.

14 **Duration of Child Custody, Visitation, and Support Orders**

If this form is attached to Form DV-130 (*Restraining Order After Hearing*), the custody and visitation orders in this form remain in effect after the restraining orders on Form DV-130 end.

This is a Court Order.