ATTORNEY OR PARTY WITHOUT ATTORNEY TELEPHO	NE NO. FOR COURT USE ONLY
ATTORNEY FOR (Name)	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	EI. DORADO
STREET ADDRESS:	EL DORADO
MAILING ADDRESS: CITY AND ZIP CODE:	
PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
REQUEST AND ORDER	FOR FREE SERVICE OF ORDERS
[ ] Domestic Violence	[ ] Civil Harassment
	use [ ] Workplace Violence
Protected Person's Name:	<del></del>
Name of Person to be Restrained:	
1 I am ontitled for free corrie	o of the restraining orders by the shoriff
1. I am entitled for free servic or marshal because (check one	e of the restraining orders by the sheriff ):
	violence prevention restraining orders on
Form DV-100.	
b. [ ] I asked for civil har	cassment restraining orders on Form
	s based on my fear of (check at least one
<pre>box, if applicable)   (1) [ ] credible this</pre>	cost of wiolongo
(2) [ ] stalking	eat of violence
-	
	Dependent Adult Abuse orders issued
Institutions Code (commenc	of Division 9 of Welfare and ing with Section 15600)
Indefederent code (comment	1119 11111 20001011 100007
	Violence orders issued under Code of
fear of (check at least on	7.8(q)(1), and my request was based on my
(1) [ ] credible th	
(2) [ ] stalking	
I declare under nenalty of ne	rjury, under the laws of the State of
California, that the information a	
Dated:	
	Signature of Party

Protected person's nameCase Number:		
COURT ORDER		
<ol> <li>The Court has reviewed the request for free service of orders and fithat (check one box only):         <ul> <li>[] The person [] does [] does not qualify for free service of orders under Chapter 11 of Part 3 of Division 9 of Welfare and Institutions Code (commencing with Section 15600), Elder and Dependent Adult Abuse orders.</li> <li>[] The person [] does [] does not qualify for free service orders under Code of Civil Procedure section 527.8(x)(1), Workp Violence orders.</li> <li>[] The person [] does [] does not qualify for free service of orders under Code of Civil Procedure section 527.6(y)(1), Civil Harassment orders.</li> </ul> </li> <li>The sheriff or marshal shall serve the order(s)[] without cost [] with cost to the requesting party.</li> </ol>	of	
Dated: Judicial Officer		
3. [ ]The person qualifies for free service of Domestic Violence Restraining Orders without cost (a signed Court order for free service is not required).  Clerk's Signature  Date	_	
<ul> <li>Instructions for Protected Person</li> <li>Fill out page 1 of this form. This form will allow you to ask the sheriff marshal to serve the restraining order on the restrained person.</li> <li>Give the form to the court clerk together with your request for a restrain order, protective order or injunction.</li> <li>Ask the clerk how to make sure the sheriff or marshal gets your papers for service.</li> <li>If you do not qualify for free service of the restraining order under this request, you may pay the sheriff or marshal to serve the order on the restrained person.</li> </ul>	ning r	
• The sheriff or marshal is allowed to bill the court for orders or injunct described in Chapter 11 of Part 3 of Division 9 of Welfare and Instituti Code (commencing with Section 15600) and Code of Civil Procedure section 527.8(q)(1). The sheriff or marshal may bill the court for service if the party qualifies for free service in item 1a or 1b above.	ons 1	
If the sheriff or marshal is seeking reimbursement for service, the b below must be filled out and a copy of this form returned to the cour listed on page 1. This is not a proof of service.  Service of the order was made or attempted on (date):  Fee for service: \$  Date:  (Title and Agency)		

(Type/Print Name of Law Enforcement Rep (Signature of Law Enforcement Rep)