

Clerk stamps date here when form is filed.

**Use this form to respond to the *Request to Renew Restraining Order (Form WV-700)***

- Fill out this form and then take it to the court clerk.
- Have someone age 18 or older—**not you**—serve the petitioner by mail with a copy of this form and any attached pages. (Use *Form WV-250, Proof of Service of Response by Mail.*)

**1 Petitioner (Employer)**

Name: \_\_\_\_\_

Court name and street address:

**Superior Court of California, County of**

**2 Employee (Protected Person)**

Name: \_\_\_\_\_

**3 Respondent (Restrained Person)**

a. Your Name: \_\_\_\_\_

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

Name: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Fill in case number:

**Case Number:**

b. Your Address (you may give a mailing address if you want to keep your street address private; skip this if you have a lawyer):

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

The court will consider your *Response* at the hearing. Write your hearing date, time, and place from Form WV-710 item 4 here.

**Hearing Date** → Date: \_\_\_\_\_  
Time: \_\_\_\_\_

Dept.: \_\_\_\_\_ Room: \_\_\_\_\_

**You must continue to obey the current restraining order until the hearing.** At the hearing, the court can extend the order against you for up to another three years.

**4 Response**

- a.  I agree to extend the order.
- b.  I do not agree to extend the order.
- c.  I agree to the following order instead (specify below):

Check here if there is not enough space for your answer. Attach a sheet of paper and write "Attachment 4c—Order Requested" for a title. You may use Form MC-025, Attachment.

d.  I ask the court not to renew the order for the following reasons (specify below):

Check here if there is not enough space for your answer. Put your complete answer on the attached sheet of paper or Form MC-025 and write "Attachment 4d—Reasons Not to Renew," for a title.



Case Number:

Date: \_\_\_\_\_

\_\_\_\_\_  
*Lawyer's name, if you have one*



\_\_\_\_\_  
*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: \_\_\_\_\_

\_\_\_\_\_  
*Type or print your name*



\_\_\_\_\_  
*Sign your name*

