| | DV-200 | Proof of Perso | nal Service | | Clerk stamps da | ite here when form is filed. |
|---|--|---|---|----------|-----------------|--|
| 1 | Name of Party Asking for Protection: | | | | | |
| 2 | Name of Party to Be Restrained: | | | | | |
| 3 | Violence Restrate • Give a copy of a (you cannot send | ge or older. items 1 or 8 of equest for Domestic ining Order. ill documents checked i | n 4 to the restrained part complete and sign this for | | | e and street address: rt of California, County of |
| 4 | I gave the party in ② a copy of all the documents checked: a. □ DV-109 with DV-100 and a blank DV-120 (Notice of Court Hearing; Request for Domestic Violence Restraining Order; blank Response to Request for Domestic Violence Restraining Order) b. □ DV-110 (Temporary Restraining Order) c. □ DV-105 and DV-140 (Request for Child Custody and Visitation Orders, Child Custody and | | | | | |
| 5 | I personally gave ca. Date:b. At this address | T | checked above to the par | ty in ② | | |
| | | | | _ State: | | Zip: |
| 6 | Address: | | | | | Zip: |
| | Telephone: | | | | | |
| | (If you are a registered process server): County of registration: Registratio | | | | n number: | |
| 7 | Server's Signa I declare under per correct. | ature | ne laws of the State of Ca | | | |
| | Type or print serve | er's name | Server | to sign | here | |