

**Proof of Service of Order  
After Hearing by Mail**

Clerk stamps date here when form is filed.

You may serve Form EA-130, Elder or Dependent Adult Abuse Restraining Order After Hearing, on the restrained person by mail if the restrained person was not at the hearing and:

- Before the hearing, the restrained person was personally served with Form EA-110, Temporary Restraining Order, and proof of service of Form EA-110 was presented to the court at the hearing; and
- The judge's orders in Form EA-130 are the same as in Form EA-110 except for the expiration date.

Fill in court name and street address:  
**Superior Court of California, County of**

**1 Protected Elder or Dependent Adult**

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

**2 Restrained Person**

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

Fill in case number:  
**Case Number:**

**PROOF OF SERVICE BY MAIL**

**3** I am 18 years of age or older and am not a party to this proceeding or a person listed in item **3** of Form EA-130. I live or am employed in the county where the mailing took place. I mailed the restrained person a copy of:

- a. Form EA-130, *Elder or Dependent Adult Abuse Restraining Order After Hearing*
- b.  Other (specify): \_\_\_\_\_

**4** I placed copies of the documents above in a sealed envelope and mailed them as described below:

- a. Mailed to (name): \_\_\_\_\_
- b. To this address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- c. On (date): \_\_\_\_\_ Mailed from: City: \_\_\_\_\_ State: \_\_\_\_\_

**5 Server's Information**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(If you are a registered process server):

County of registration: \_\_\_\_\_ Registration number: \_\_\_\_\_

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 server's name  \_\_\_\_\_  
Server to sign here