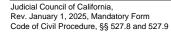
WV-120

Response to Petition for Workplace Violence Restraining Orders

Use this form to respond to the Petition (form WV-100)

- Read How Can I Respond to a Petition for Workplace Violence Restraining Orders? (form WV-120-INFO) to protect your rights.

nployee Who Petitioner Asserts Suffered Harablence, or Threat of Violence Il Name: espondent (Person From Whom Protection Is a Your Name: Your Lawyer (if you have one for this case) Name: State Bar Note Firm Name: Your Address (You may give a mailing address if you want to keep your street address private; skip this if you have a	Sought)	Fill in case number: Case Number:	:	
espondent (Person From Whom Protection Is Your Name: Your Lawyer (if you have one for this case) Name: Firm Name: Your Address (You may give a mailing address if you want	.:		:	
State Bar No. Your Address (You may give a mailing address if you want	.:	Case Number:		
Name: State Bar No Firm Name: Your Address (You may give a mailing address if you wan				
Firm Name: Your Address (You may give a mailing address if you wan				
Firm Name:Your Address (You may give a mailing address if you wan				
	,			
lawyer.) Address:	hearing. V from form	Vrite your hearing WV-109, item		
City: State: Zip:		→ Date:	Time:	
Telephone: Fax:	Date	Dept.:	Room:	
Email Address:	If you were served with a Temporary			
i diddiiai ddiiaadt diadid			must obey it until th	
T , ,1 1 , 1		•	he court may make st for up to three year	
☐ I do not agree to the orders requested.	orders aga	inist you that ias	to the to three year	
(Specify why you disagree in item (2) on page 4.)				
☐ I agree to the following orders (specify below or in item	n (12) on page	4):		
I agree to the following orders (specify below or in iter	n (12) on page	. 4): 		
Stay-Away Orders				
☐ I agree to the orders requested.				
☐ I do not agree to the orders requested. (Specify why you	ı disagree in i	item (12) on pag	re 4.)	



Clerk stamps date here when form is filed.



		Case Number:
<u>6</u>)	☐ Protected Persons Not Listed in ②	
	a. I agree that the persons listed in item 4 of the Petition may be pr	rotected by the order requested.
	b. I do not agree that the persons listed in item of the Petition may	y be protected by the order requested.
7) Fir	Firearms (Guns), Firearm Parts, and Ammunition	
	If you were served with form WV-110, <i>Temporary Restraining Order</i> , (guns), firearm parts, or ammunition. This includes firearm receivers used as or easily turned into a receiver or frame (see Penal Code section WV-110.) You must sell to or store with a licensed gun dealer, or turn firearms (guns) and firearm parts in your immediate possession or cowith form WV-110. You must file a receipt with the court. You may the Parts (form and parts) for the receipt.	s and frames, and any item that may be ion 16531). (See item 8) of form in to a law enforcement agency, any ontrol within 24 hours of being served
	a. I do not own or control any firearms (guns), firearm parts, or amm	unition.
	b. I ask for an exemption from the firearms prohibition under Code of carrying a firearm is a condition of my employment, and my employment position where a firearm is unnecessary. (Explain):	
	☐ Check here if there is not enough space below for your answer sheet of paper and write "Attachment 7b—Firearms Surrender, Attachment.	
	c. I have turned in my firearms (guns) and firearm parts to the police licensed gun dealer.	or sold them to or stored them with a
	A copy of the receipt is attached. has already been file	ed with the court.
8	No Body Armor	
9	If you were served with form WV-110, <i>Temporary Restraining Order</i> , yo	ou are prohibited from owning possessing
	or buying body armor. You must also relinquish any body armor you have	
	(Check all that apply):	
	a. I do not own or have any body armor.	
	b. \square I have relinquished all body armor that I have in my possession.	
	c. I was granted an exception, or will ask for an exception, to have be by a chief of police or sheriff. See Penal Code section 31360(c). (A permission, if you have one.)	



	0	her Orders
') ⊔ a.		I agree to the orders requested.
b.		
		I do not agree to the orders requested. (Specify why you disagree in item (12) on page 4.)
c.		I agree to the following orders (specify below or in item (12) on page 4):
	I did	some or all of the things that the petitioner has accused me of, my actions were justified or excused for the ing reasons (explain):
	Ch	eck here if there is not enough space below for your answer. Put your complete answer on an attached sheet paper and write "Attachment 11—Justification or Excuse" as a title. You may use form MC-025, Attachment.
_		
_		

Case Number:

	each order requested that you a	lo not agree with.	
	not enough space below for you ttachment 12—Reasons I Disag		=
No Fee for Filing		petitioner claims in for	rm WV-100 item (14) to be ent
_	waive the filing fee because the		
I ask the court to to free filing. I request that I no	t be required to pay the filing for Court Fees, <i>must be filed separate</i>		e for a fee waiver. (Form FW-C
I ask the court to to free filing. I request that I no	t be required to pay the filing fe		e for a fee waiver. (Form FW-C
I ask the court to to free filing. I request that I no Request to Waive	t be required to pay the filing fe	rately.)	
I ask the court to to free filing. I request that I no Request to Waive Costs I ask the court to	t be required to pay the filing feet Court Fees, must be filed separated order the petitioner to pay my o	court costs. The amount	ts requested are:
I ask the court to to free filing. I request that I no Request to Waive	t be required to pay the filing feet Court Fees, must be filed separated order the petitioner to pay my of Amount	court costs. The amount	ts requested are: Amount
I ask the court to to free filing. I request that I no Request to Waive Costs I ask the court to	t be required to pay the filing feet Court Fees, must be filed separated order the petitioner to pay my of Amount	court costs. The amount	Es requested are: Amount S C

Case Number:



Rev. January 1, 2025

	Case Number:
Number of pages attached to this form, if any:	
Date:	
Lawyer's name (if any)	Lawyer's signature
Lawyer s name (if any)	Lawyer's signature
I declare under penalty of perjury under the laws of the State of Correct.	California that the information above is true and
Date:	
Date:	
	•
Type or print your name	Sign your name