

DV-100

Request for Domestic Violence Restraining Order

Clerk stamps date here when form is filed.

You must also complete form CLETS-001, Confidential CLETS Information, and give it to the clerk when you file this Request.

FILED San Francisco County Superior Court

JAN 09 2018

CLERK OF THE COURT

BY [Signature] Deputy Clerk

1 Name of Person Asking for Protection: Laura Owens Age: 27

Your lawyer in this case (if you have one):

Name: in pro per State Bar No.:

Firm Name:

Address (If you have a lawyer for this case, give your lawyer's information. If you do not have a lawyer and want to keep your home address private, give a different mailing address instead. You do not have to give your telephone, fax, or e-mail.):

Address: 3330 Pierce Street, apt. 305

City: San Francisco State: CA Zip: 94123

Telephone: Fax:

E-Mail Address:

Fill in court name and street address:

Superior Court of California, County of San Francisco 400 McAllister Street San Francisco, CA 94102 Unified Family Court

Court fills in case number when form is filed.

Case Number FDV-18-813693

2 Name of Person You Want Protection From: Michael Marraccini

Description of person you want protection from:

Sex: [X] M [ ] F Height: 6'4" Weight: 220 Hair Color: Brownish Eye Color: Green Race: White Age: 30 Date of Birth: 6/3/87 or 6/4/87 Address (if known): 2280 Filbert St. City: San Francisco State: CA Zip: 94123

3 Do you want an order to protect family or household members? [ ] Yes [X] No

If yes, list them:

Table with 5 columns: Full name, Sex, Age, Lives with you?, Relationship to you. Rows include Ronn Owens (Father), Jan Owens (Mother), Sarah Owens (Sister).

[ ] Check here if you need more space. Attach a sheet of paper and write "DV-100, Protected People" for a title.

4 What is your relationship to the person in (2)? (Check all that apply):

- a. [ ] We are now married or registered domestic partners.
b. [ ] We used to be married or registered domestic partners.
c. [ ] We live together.
d. [ ] We used to live together.
e. [ ] We are related by blood, marriage, or adoption (specify relationship):
f. [X] We are dating or used to date, or we are used to be engaged to be married.
g. [ ] We are the parents together of a child or children under 18:

If you do not have one of these relationships, the court may not be able to consider your request. Read form DV-500-INFO for help.

Child's Name: Date of Birth:

Child's Name: Date of Birth:

Child's Name: Date of Birth:

[ ] Check here if you need more space. Attach a sheet of paper and write "DV-100, Additional Children" for a title.

h. [ ] We have signed a Voluntary Declaration of Paternity for our child or children. (Attach a copy if you have one).

This is not a Court Order.



**5 Other Restraining Orders and Court Cases**

a. Are there any restraining/protective orders currently in place OR that have expired in the last six months (emergency protective orders, criminal, juvenile, family)?  
 No  Yes (date of order): \_\_\_\_\_ and (expiration date): \_\_\_\_\_ (Attach a copy if you have one).

b. Have you or any other person named in ③ been involved in another court case with the person in ②?  
 No  Yes If yes, check each kind of case and indicate where and when each was filed:

Kind of Case	County or Tribe Where Filed	Year Filed	Case Number (if known)
<input type="checkbox"/> Divorce, Nullity, Legal Separation	_____	_____	_____
<input type="checkbox"/> Civil Harassment	_____	_____	_____
<input type="checkbox"/> Domestic Violence	_____	_____	_____
<input type="checkbox"/> Criminal	_____	_____	_____
<input type="checkbox"/> Juvenile, Dependency, Guardianship	_____	_____	_____
<input type="checkbox"/> Child Support	_____	_____	_____
<input type="checkbox"/> Parentage, Paternity	_____	_____	_____
<input type="checkbox"/> Other (specify): _____	_____	_____	_____
<input type="checkbox"/> Check here if you need more space. Attach a sheet of paper and write "DV-100, Other Court Cases" for a title.			

**Check the orders you want.**

**6  Personal Conduct Orders**

I ask the court to order the person in ② not to do the following things to me or anyone listed in ③:

- a.  Harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, molest, destroy personal property, disturb the peace, keep under surveillance, impersonate (on the Internet, electronically or otherwise), or block movements
- b.  Contact, either directly or indirectly, in any way, including but not limited to, by telephone, mail or e-mail or other electronic means

The person in ② will be ordered not to take any action to get the addresses or locations of any protected person unless the court finds good cause not to make the order.

**7  Stay-Away Order**

a. I ask the court to order the person in ② to stay at least 100 yards away from (check all that apply):

- Me  My school
- My home  Each person listed in ③
- My job or workplace  The child(ren)'s school or child care
- My vehicle  Other (specify): \_\_\_\_\_

b. If the person listed in ② is ordered to stay away from all the places listed above, will he or she still be able to get to his or her home, school, job, workplace, or vehicle?  Yes  No (If no, explain): \_\_\_\_\_

**8  Move-Out Order**

(If the person in ② lives with you and you want that person to stay away from your home, you must ask for this move-out order.)

I ask the court to order the person in ② to move out from and not return to (address): \_\_\_\_\_

I have the right to live at the above address because (explain): \_\_\_\_\_

**This is not a Court Order.**



**9 Guns or Other Firearms or Ammunition**

I believe the person in (2) owns or possesses guns, firearms, or ammunition.  Yes  No  I don't know  
If the judge approves the order, the person in (2) will be ordered not to own, possess, purchase, or receive a firearm or ammunition. The person will be ordered to sell to, or store with, a licensed gun dealer, or turn in to law enforcement, any guns or firearms that he or she owns or possesses.

**10  Record Unlawful Communications**

I ask for the right to record communications made to me by the person in (2) that violate the judge's orders.

**11  Care of Animals**

I ask for the sole possession, care, and control of the animals listed below. I ask the court to order the person in (2) to stay at least 3 yards away from and not take, sell, transfer, encumber, conceal, molest, attack, strike, threaten, harm, or otherwise dispose of the following animals:

Buttons - toy poodle, very old, blind, no teeth, tongue permanently out to the right

I ask for the animals to be with me because:

he does not own the dog with me - however, he has threatened to 'pnt' him and has expressed his hatred of the dog repeatedly

**12  Child Custody and Visitation**

- a.  I do not have a child custody or visitation order and I want one.
- b.  I have a child custody or visitation order and I want it changed.

If you ask for orders, you must fill out and attach form DV-105, Request for Child Custody and Visitation Orders. You and the other parent may tell the court that you want to be legal parents of the children (use form DV-180, Agreement and Judgment of Parentage).

**13  Child Support (Check all that apply):**

- a.  I do not have a child support order and I want one.
- b.  I have a child support order and I want it changed.
- c.  I now receive or have applied for TANF, Welfare, CalWORKS, or Medi-Cal.

If you ask for child support orders, you must fill out and attach form FL-150, Income and Expense Declaration or form FL-155, Financial Statement (Simplified).

**14  Property Control**

I ask the court to give *only* me temporary use, possession, and control of the property listed here:

\_\_\_\_\_

**15  Debt Payment**

I ask the court to order the person in (2) to make these payments while the order is in effect:

Check here if you need more space. Attach a sheet of paper and write "DV-100, Debt Payment" for a title.

Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due date: \_\_\_\_\_

**16  Property Restraint**

I am married to or have a registered domestic partnership with the person in (2). I ask the judge to order that the person in (2) not borrow against, sell, hide, or get rid of or destroy any possessions or property, except in the usual course of business or for necessities of life. I also ask the judge to order the person in (2) to notify me of any new or big expenses and to explain them to the court.

**17  Spousal Support**

I am married to or have a registered domestic partnership with the person in (2) and no spousal support order exists. I ask the court to order the person in (2) to pay spousal support. (You must complete, file, and serve form FL-150, Income and Expense Declaration, before your hearing).

**This is not a Court Order.**



**18**  **Rights to Mobile Device and Wireless Phone Account**

**a.**  **Property control of mobile device and wireless phone account**

I ask the court to give **only** me temporary use, possession, and control of the following mobile devices: \_\_\_\_\_ and the wireless phone account for the following wireless phone numbers because the account currently belongs to the person in **(2)** :

- (including area code): \_\_\_\_\_  my number  number of child in my care
- (including area code): \_\_\_\_\_  my number  number of child in my care
- (including area code): \_\_\_\_\_  my number  number of child in my care

Check here if you need more space. Attach a sheet of paper and write "DV-100, Rights to Mobile Device and Wireless Phone Account" for a title.

**b.**  **Debt Payment**

I ask the court to order the person in **(2)** to make the payments for the wireless phone accounts listed in 18a because:

Name of the wireless service provider is: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Due Date: \_\_\_\_\_

*If you are requesting this order, you must complete, file, and serve form FL-150, Income and Expense Declaration, before your hearing.*

**c.**  **Transfer of Wireless Phone Account**

I ask the court to order the wireless service provider to transfer the billing responsibility and rights to the wireless phone numbers listed in 18a to me because the account currently belongs to the person in **(2)** .

*If the judge makes this order, you will be financially responsible for these accounts, including monthly service fees and costs of any mobile devices connected to these phone numbers. You may be responsible for other fees. You must contact the wireless service provider to find out what fees you will be responsible for and whether you are eligible for an account.*

**19**  **Insurance**

I ask the court to order the person in **(2)** NOT to cash, borrow against, cancel, transfer, dispose of, or change the beneficiaries of any insurance or coverage held for the benefit of me or the person in **(2)**, or our child(ren), for whom support may be ordered, or both.

**20**  **Lawyer's Fees and Costs**

I ask that the person in **(2)** pay some or all of my lawyer's fees and costs. *You must complete, file, and serve form FL-150, Income and Expense Declaration, before your hearing.*

**21**  **Payments for Costs and Services**

I ask the court to order the person in **(2)** to pay the following: *You can ask for lost earnings or your costs for services caused directly by the person in **(2)** (damaged property, medical care, counseling, temporary housing, etc.). You must bring proof of these expenses to your hearing.*

Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Pay to: \_\_\_\_\_ For: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

**22**  **Batterer Intervention Program**

I ask the court to order the person listed in **(2)** to go to a 52-week batterer intervention program and show proof of completion to the court.

**23**  **Other Orders**

What other orders are you asking for? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check here if you need more space. Attach a sheet of paper and write "DV-100, Other Orders" for a title.

**This is not a Court Order.**



**24**  **Time for Service (Notice)**

The papers must be personally served on the person in **(2)** at least five days before the hearing, unless the court orders a shorter time for service. If you want there to be fewer than five days between service and the hearing, explain why below. For help, read form DV-200-INFO, "What Is Proof of Personal Service"?

**25** **No Fee to Serve (Notify) Restrained Person**

If you want the sheriff or marshal to serve (notify) the restrained person about the orders for free, ask the court clerk what you need to do.

**26** **Court Hearing**

The court will schedule a hearing on your request. If the judge does not make the orders effective right away ("temporary restraining orders"), the judge may still make the orders after the hearing. If the judge does not make the orders effective right away, you can ask the court to cancel the hearing. Read form DV-112, Waiver of Hearing on Denied Request for Temporary Restraining Order, for more information.

**27** **Describe Abuse**

Describe how the person in **(2)** abused you. Abuse means to intentionally or recklessly cause or attempt to cause bodily injury to you; or to place you or another person in reasonable fear of imminent serious bodily injury; or to harass, attack, strike, threaten, assault (sexually or otherwise), hit, follow, stalk, molest, keep you under surveillance, impersonate (on the Internet, electronically or otherwise), batter, telephone, or contact you; or to disturb your peace; or to destroy your personal property. (For a complete definition, see Fam. Code, §§ 6203, 6320.)

a. Date of most recent abuse: 1/7/18

1. Who was there? me, his sister, ~~and~~ in public

2. Describe how the person in **(2)** abused you or your child(ren):  
After a year of abuse, the relationship ended. Since then, he told me he had moved to Sacramento. However, he has shown up at multiple venues that he knows I will be at - restaurants with my family and friends and in front of my building. On Friday the 9<sup>th</sup> he walked into a restaurant he knew I ~~was~~ was at, lingered in front of my table where I was eating with a friend and left after 5-10 min. On the 7<sup>th</sup> he and his sister came up to me less than a block from my home, accussed me out, and refused to allow me to call the police, I was able to get away, but I was terrified.

Check here if you need more space. Attach a sheet of paper and write "DV-100, Recent Abuse" for a title.

3. Did the person in **(2)** use or threaten to use a gun or any other weapon?  No  Yes (If yes, describe):

4. Describe any injuries: emotional - extreme stress, panic attack, and concern for my personal safety as I know what he is capable of and don't know when and where he will show up next. I have been afraid to leave my home.

5. Did the police come?  No  Yes  
If yes, did they give you or the person in **(2)** an Emergency Protective Order?  Yes  No  I don't know  
Attach a copy if you have one.

The order protects  you or  the person in **(2)**

**This is not a Court Order.**



**27 Describe Abuse (continued)**

Has the person in (2) abused you (or your child(ren)) other times?

- b. Date of abuse: December 30, 2016
- 1. Who was there? Me, Michael, Karen Floer Timberger, + other plane passengers
- 2. Describe how the person in (2) abused you or your child(ren):  
Michael and I were on a flight to Iceland. He was emotionally abusive to me throughout the flight, telling me how worthless I was as a person and having me in tears for most of the eight hour flight. When he went to the restroom towards the end of the flight, a passenger in the seat in front of me slipped me a note on a napkin (I will bring it to the hearing) she included her contact info) and  
 Check here if you need more space. Attach a sheet of paper and write "DV-100, Recent Abuse" for a title.
- 3. Did the person in (2) use or threaten to use a gun or any other weapon?  No  Yes (If yes, describe):
- 4. Describe any injuries: his treatment had me feeling so low about myself that I became suicidal and the note from the stranger was something I read to remind myself that I was still beautiful in someone's eyes since he made me feel so unworthy.
- 5. Did the police come?  No  Yes  
If yes, did they give you or the person in (2) an Emergency Protective Order?  
 Yes  No  I don't know Attach a copy if you have one.  
The order protects  you or  the person in (2)  
If the person in (2) abused you other times, check here  and use Form DV-101, Description of Abuse or describe any previous abuse on an attached sheet of paper and write "DV-100, Previous Abuse" for a title.

**28 Other Persons to Be Protected**

The persons listed in item (3) need an order for protection because (describe): he knows my family's address, told me on 1/7/18 that he 'hates' them, and has a key to my father's work that he won't give back. My dad, Ronn Owens, has been a talk show host on KGO in SF for 42 years - he has been using his association with him to get into restaurants and his club and has threatened to go public about my suicidal thoughts in an effort to harm my dad's image. My dad has cancer, a heart valve infection, and Parkinson's for 16 years and is very weak. Given his abuse to me, I do not know if he would harm him or other family members.

**29** Number of pages attached to this form, if any: 3

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date: 1/9/18

Laura Owens  
Type or print your name

Laura Owens  
Sign your name

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

Lawyer's name, if you have one

Lawyer's signature

**This is not a Court Order.**

SHORT TITLE: OWENS v. MARRACCINI	CASE NUMBER:
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ATTACHMENT (Number) : 1  
 (This Attachment may be used with any Judicial Council form.)

DV-100, RECENT ABUSE

Said that I was being abused by a sick man and needed to run and seek protection from him.

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page 1 of 3  
 (Add pages as required)

This form is attached to DV-100, Request for Domestic Violence Restraining Order.

1 Name of person asking for protection: Laura Owens

2 Name of person you want protection from: Michael Marracchi

3 Describe abuse to you or your children.

a. Date of abuse: January 2017 November 2017

b. Who was there? Me + Michael

Describe how the person in 2 abused you or your children:

Michael began to choke me in January 2017 on our trip to Iceland and it continued until we last physically engaged with each other in November. He choked me while we were intimate, although I begged him to stop every time. Since our relationship hadn't had choking in it for the first six months we were together, I was shocked that this started and he kept telling me he wouldn't do it again. However, he did on every occasion and told me he wanted to be in complete control of me and liked the ability to control my breath. I told him not to EVERY time. On three occasions, he used a pillow over my face and on one occasion, I passed out for a few seconds. He is a foot taller than me and I could not breathe, let alone scream for help. I was terrified afterwards and told my friends, family, and doctors about the abuse immediately. However, I was advised not to file a report at the time with the police because he had a very hair trigger temper and my advisors did not know if he would take it one step further if I got the police involved. He told me on several occasions that he worried he would be blamed if I was found dead.

d. Describe any use or threatened use of guns or other weapons:

Just his hands

e. Describe any injuries: I came to my parents' house on many of those occasions with spots under my eyes and on my face from the lack of oxygen during choking. I have been treated for PTSD since his abuse started and continue to be treated for it. I also have insomnia, nightmares and it that lead to night sweats, panic attacks

f. Did the police or other law enforcement come?  No  Yes

If yes, did they give you or the person in 2 an Emergency Protective Order?  Yes  No  I don't know

The Emergency Protective Order protects  You  The person in 2

Attach a copy of the Emergency Protective Order if you have one.





4 Describe abuse to you or your children.

Has the person in (2) abused you (or your children) other times?

a. Date of abuse: March 2016 - last encounter (harrasment) on 1/7/18

b. Who was there? multiple occasions - Ronn Owens, Jan Black, Sarah Owens, podcast audience, various friends

c. Describe how the person in (2) abused you or your children:

Mike is a pathological liar and told me and my family many lies while we got to know him, like how he had dated Aaron Rodgers sister for a few months, only to find out she did not exist, that he dated a star from Maden family, but didn't remember who (he told me on 1/7/18 that it was Sarah Hyland - it was not). This was a complete fabrication. He told me many other lies during his time with me and many in front of my friends. He tried out to be a co-host for a podcast for KGO, where he stated that he was the VP of several Fortune 500 companies" which he never was and that is very easily provable. While the podcast ended up being taken off of the KGO website due to his blatant lies about his background that would damage the station's reputation, I have saved a copy of him saying this in his voice. When I was in an accident as the passenger in an Uber in April of 2017, he repeatedly told me I needed to fake injuries in order to get a bigger insurance payout - he said he helped a past girlfriend do this and strongly encouraged me to do the same. As it was, I was injured but I would never dream of committing fraud and this seems totally right to him because as he said, I could use a big settlement to be a great "sugar mama" for him.

d. Describe any use or threatened use of guns or other weapons: \_\_\_\_\_

e. Describe any injuries: Emotional - extensive - I fell for a person who claimed to be someone they are not. My reputation as a developing talk show host for Cumulus media would have been extremely damaged by associating myself with someone who so blatantly lied about his employ background. Luckily, someone took it down after looking it up when it sounded suspicious. It has been hard to trust people since.

f. Did the police or other law enforcement come?  No  Yes  
If yes, did they give you or the person in (2) an Emergency Protective Order?  Yes  No  I don't know  
The Emergency Protective Order protects  You  The person in (2)  
*Attach a copy of the Emergency Protective Order if you have one.*

5 Describe abuse to you or your children.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check here if you need more space. Attach a sheet of paper and write "DV-101—Description of Abuse" for a title.

copy of police report number

LAURA OWENS v. Michael MARRACCINI, Attachment 3 of 3

San Francisco Police Department  
REPORTEE FOLLOW-UP

Case Number: 18009189

Case numbers are assigned to an Investigator based on facts obtained during the initial investigation.

- |                                     |                        |          |
|-------------------------------------|------------------------|----------|
| <input checked="" type="checkbox"/> | Company A (Central)    | 315-2400 |
| <input type="checkbox"/>            | Company B (Southern)   | 575-6000 |
| <input type="checkbox"/>            | Company C (Bayview)    | 671-2300 |
| <input type="checkbox"/>            | Company D (Mission)    | 558-5400 |
| <input type="checkbox"/>            | Company E (Northern)   | 614-3400 |
| <input type="checkbox"/>            | Company F (Park)       | 242-3000 |
| <input type="checkbox"/>            | Company G (Richmond)   | 666-8000 |
| <input type="checkbox"/>            | Company H (Ingleside)  | 404-4000 |
| <input type="checkbox"/>            | Company I (Taraval)    | 759-3100 |
| <input type="checkbox"/>            | Company J (Tenderloin) | 345-7300 |

Please contact the Investigation unit checked above to provide additional information not available during initial police report.

Information such as:

- Serial numbers of lost or stolen items

PARTY WITHOUT ATTORNEY OR ATTORNEY: STATE BAR NO.: NAME: Tara Berta SBN 177541, Elisha Jussen-Cooke SBN 283446 FIRM NAME: Cooperative Restraining Order Clinic STREET ADDRESS: 3543 18th Street, Box #5 CITY: San Francisco STATE: CA ZIP CODE: 94110 TELEPHONE NO.: 415-864-1790 FAX NO.: 415-241-9491 E-MAIL ADDRESS: elisha@roclinic.org ATTORNEY FOR (name): PETITIONER, LAURA OWENS			FOR COURT USE ONLY  <b>FILED</b> Superior Court of California County of San Francisco APR 09 2018 CLERK OF THE COURT BY: <u>P. C. [Signature]</u> Deputy Clerk
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN FRANCISCO STREET ADDRESS: 400 McAllister Street MAILING ADDRESS: CITY AND ZIP CODE: San Francisco, CA 94102 BRANCH NAME:			
PETITIONER: Laura Owens RESPONDENT: Michael Marraccine OTHER PARENT/PARTY:			
<b>RESPONSIVE DECLARATION TO REQUEST FOR ORDER</b>			
HEARING DATE: April 13 <sup>9</sup> 2018	TIME: 1:30 p.m.	DEPARTMENT OR ROOM: 403	
		CASE NUMBER: FDV-18-813693	

Read Information Sheet: Responsive Declaration to Request for Order (form FL-320-INFO) for more information about this form.

1.  RESTRAINING ORDER INFORMATION

- a.  No domestic violence restraining/protective orders are now in effect between the parties in this case.
- b.  I agree that one or more domestic violence restraining/ protective orders are now in effect between the parties in this case.

2.  CHILD CUSTODY

VISITATION (PARENTING TIME)

- a.  I consent to the order requested for child custody (legal and physical custody).
- b.  I consent to the order requested for visitation (parenting time).
- c.  I do not consent to the order requested for  child custody  visitation (parenting time)  
 but I consent to the following order:

3.  CHILD SUPPORT

- a. I have completed and filed a current *Income and Expense Declaration* (form FL-150) or, if eligible, a current *Financial Statement (Simplified)* (form FL-155) to support my responsive declaration.
- b.  I consent to the order requested.
- c.  I consent to guideline support.
- d.  I do not consent to the order requested  but I consent to the following order:

4.  SPOUSAL OR DOMESTIC PARTNER SUPPORT

- a. I have completed and filed a current *Income and Expense Declaration* (form FL-150) to support my responsive declaration.
- b.  I consent to the order requested.
- c.  I do not consent to the order requested  but I consent to the following order:

PETITIONER: Laura Owens RESPONDENT: Michael Marraccine OTHER PARENT/PARTY:	CASE NUMBER:  FDV-18-813693
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5.  PROPERTY CONTROL

- a.  I consent to the order requested.
- b.  I do not consent to the order requested  but I consent to the following order:

6.  ATTORNEY'S FEES AND COSTS

- a. I have completed and filed a current *Income and Expense Declaration* (form FL-150) to support my responsive declaration.
- b. I have completed and filed with this form a *Supporting Declaration for Attorney's Fees and Costs Attachment* (form FL-158) or a declaration that addresses the factors covered in that form.
- c.  I consent to the order requested.
- d.  I do not consent to the order requested  but I consent to the following order:

7.  DOMESTIC VIOLENCE ORDER

- a.  I consent to the order requested.
- b.  I do not consent to the order requested  but I consent to the following order:

8.  OTHER ORDERS REQUESTED

- a.  I consent to the order requested.
- b.  I do not consent to the order requested  but I consent to the following order:

9.  TIME FOR SERVICE / TIME UNTIL HEARING

- a.  I consent to the order requested.
- b.  I do not consent to the order requested  but I consent to the following order:


10.  FACTS TO SUPPORT my responsive declaration are listed below. The facts that I write and attach to this form cannot be longer than 10 pages, unless the court gives me permission.  Attachment 10.

Please see attached Declaration.

I declare under penalty of perjury under the laws of the State of California that the information provided in this form and all attachments is true and correct.

Date: 4-8-18

Tara Berta  
 (TYPE OR PRINT NAME)

  
 (SIGNATURE OF DECLARANT)

PETITIONER/PLAINTIFF: Laura Owens  
RESPONDENT/DEFENDANT: Michael Marraccini

CASE NUMBER:  
FDV-18-813693

**Declaration of counsel in objection to request to set new hearing date**


I, Tara M. Berta, declare:

1. I am an attorney licensed to practice law in the State of California.
2. I am employed by the Cooperative Restraining Order Clinic ("CROC"), which agency is representing Ms. Laura Owens with her request for a restraining order against Mr. Michael Marraccini. The lead attorney representing Ms. Owens from CROC is Elisha Jussen-Cooke.
3. On January 26, 2018, this court set a hearing date for Ms. Owens's request for a restraining order. On that day, the court ordered witness declarations to be filed and served by March 29, 2018. On March 29, 2018, on behalf of Petitioner, CROC filed and served a Supplemental Declaration of Laura Owens and declarations of Joan O'Neill, Karen Ilmberger, and Jan Owens, all of whom are to be called as witnesses for Ms. Laura Owens.
4. The witnesses for Petitioner are prepared to appear in person or by phone on April 13, 2018.
5. Ms. Laura Owens does not want to continue the hearing. She is anxious to have this matter resolved as soon as possible, and she and her witnesses have planned their schedules in anticipation of the hearing proceeding on April 13.
6. If the court does grant a continuance of the hearing set for April 13, 2018, Petitioner requests that the Court order
  - (a) The matter be set on as early a date as possible;
  - (b) The new hearing date accommodate the parties' and witnesses' schedules;
  - (c) If any of Petitioner's witnesses are not able to appear in person on that date, they be allowed to appear by phone; and
  - (d) Discovery be reopened.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

4-8-18

Dated: \_\_\_\_\_

  
\_\_\_\_\_  
Tara M. Berta  
Attorney for Petitioner