	to Stop Harassment	CHAIR SIGNIFFS CAME HETE WOODSTORMS \$190.
1	Name of person who asked for the order:  NICOLE RICHIE	COPY
2	Your name: FAPRICIO LUIS MARIOTIO Your address (skip this if you have a lawyer): (If you want your address to be private, give a mailing address instead):	
	City: LOS ANGELES State: CA Zip: 90034	Fill in court name and street address:
	Your telephone (optional).  Your lawyer (if you have one): (Name, address, telephone number, and State Bar number):	Superior Court of California, County of
	Use this form to give the court your answers to CH-10	00 Fill in case number:
	<ul> <li>Read Form CH-151 to protect your rights.</li> </ul>	Case Number:
	<ul> <li>Fill out this form and then take it to the court clerk.</li> <li>Serve the person in (1) with a copy of this form and any attached pages.</li> </ul>	BS 129293
(3)	☐ Personal Conduct Orders The co	ourt will consider your Answer at the hearing.
_	a. I agree to the order requested.	your hearing date and time here:
	c. I agree to the following order (specify):  You n	nust obey the court's orders until the
	hearin	ag. If you do not come to this hearing, the may make the orders requested against you
4		r up to 3 years.
O	a. I agree to the order requested.	
	b. I do not agree to the order requested.	
_	c. I agree to the following order (specify): STAYING  CHILDREN'S SUBOL	AWAY FROM NICOLE RICHIE'S
(5)	☐ Turn In Guns or Other Firearms	
	a. [V] I do not own or have any guns or firearms.	
	b. I agree to the order requested.	
	c. I do not agree to the order requested.	
	d. I agree to the following order (specify):	
6	☐ Other Orders	
	a. I agree to the orders requested.	
	b. I do not agree to the orders requested.	
	c. I agree to the following orders (specify):	

,		Case Number:			
Your name:		BS 129293			
7 🗆 Emotional Dist	foee				
	in ① has not suffered emotional distress.				
	m this not suffered emotional distress.	(Explain):			
b. 🗸 A reasonabl					
(Explain):	A reasonable person in the same position as the person in 1 would not have suffered emotional dis (Explain): BECAUSE I WAS NOT DOING ANYTHING ASSESSIVE (L.				
		S THROUGH THE WINDOW), I WAS			
- C une heran	n in ① has suffered any emotional distress.  (Explain):	s, it is not because of what that nerson has accurat			
8 V Purpose of Acti	One				
	son in ①—if anything—was not done or				
9 Denial	— was not done of	n purpose.			
<u> </u>	anything described in 6 of Form CH-100				
b. I did some o	r all of the things described in 6 of Form	0. (Skip to (1).)			
10 Reason or Excu	of the same accorded in (6) of Polim	CH-100. (Explain in (1).)			
C I HOUSE ON EXCU					
a. What I did w	rall of the things the person in ① has as legal. (Explain):	accused me of, but:			
b. 🗌 I had a good	reason for doing these things. (Explain):-				
c.   I have other	eacons to investigate V 111 cm				
- Li racco odici i	easons to justify what I did. (Explain):				
11 _ The court should	not make an order against me h	Decause: (List facts or reasons below):			
1) IVENEVER	BEEN AT THE SOLOL	DET OF THE			
(E) AS SOON AS					
DOND THAT M.		ATTHE CHILDREN'S SCHOOL &			
3 I DO NOT HE	WE PREDITORY BEHAVIOR	AC MENTINGEN - A			
NEVER HAD P	cookens with THE LAW	POLICE, CELEBOSTIES ETC.			
	THE CKRILICALLY, I HAV	IF ACICANI NO' 1 IN CO.			
DENCES OF	ED LEGALLY ON THE C	UKB. MS RICHIE HASEVI-			
	AT BECAUSE SHIE TO	DOK PICTURES OF MY CAR.			
at the top. Give spec	eu more space. Attach a sheet of paper and w ific facts and reasons.	rite "CH-110, Item 11— Facts and Reasons"			
rvised January 1, 2005					

Your	nam	ne:			Case Number:		
12		No Fee for Filing I ask the court to waive the filing fee because the person in ① claims that I have used or threatened to use violence against them or have acted in some other way that would make them reasonably fear violence.					
13)		Lawyer's Fees and I ask the court to order p a.  Lawyer's fees b. Out-of-pocket ex because the temporary re	Costs  ayment of my:  penses  straining order was issu				
		The amounts requested a	Amount \$	Item			
14		Other Relief  I ask for additional relief as may be proper.  Number of pages attached to this form, if any: 02					
		re: 11/30/10		<u> </u>			
	I de	clare under penalty of perject.		Attorney's signature he State of California	that the information above is true and		
	Date	e: 11/30/10 FABRICIO LUIS e or print your name	MARIOTTO	, (	A		
	ı ype	e or pruu your name	, <b>r</b>	Sign your name			

## CH 110 ITEM 11 - FACTS AND REASONS

- B) THE DESTINATION OF MY PHOTOGRAPHS ARE VERY KNOWN, DIFFERENT THAN CITED ON THE ATTACHMENT # 12, I CAN PROVE IT.
- 6) THE LAST TIME I TOOK PICTURES OF NICOLE RICHE, WAS JUST ABOUT 8 MONTHS AGO.
- THINK IT IS UNTAIR TO PUT ALL THE RESPONSIBILITY
  OF MS. RICHIE'S FRUSTRATIONS WITH THE ENTIRE INDUSTRY
  IN ONLY ONE PROTESSIONAL, SPECIALLY WHEN THIS RERSON
  HAS NOT TAKEN PHOTOGRAPHS OF MS. RICHIE OR HER
  FAMILY FOR AT LEAST 8 MONTHS LIKE MENTIONED ABOVE.

## CALIFORNIA DEPARTMENT OF MOTOR VEHICLES \*\*\*CUSTOMER RECEIPT COPY\*\*\* DRIVER LICENSE/IDENTIFICATION CARD INFORMATION REQUEST

11/30/10

DAK99933616K4D2781213

DATE:11-30-10\*TIME:16:56\*

DL/NO:

B/D:08-19-1978\*NAME:MARIOTTO, FABRICIO LUIS\*

RES ADD AS OF 01-16-09: OTH ADD AS OF 06-28-07:

LOS ANGELES 90034\*

LOS ANGELES\*

IDENTIFYING INFORMATION:

SEX: MALE\*HAIR: BLACK\*EYES: BRN\*HT: 5-10\*WT: 180\*

ID CARD MLD:12-04-06\* EXP:08-10-07\*

LIC/ISS:06-28-07\* EXP:08-19-11\*CLASS:C NON-COMMERCIAL\*

ENDORSEMENTS: NONE\*

HEALTH QUESTIONNAIRE EXPIRES: NONE\*

LICENSE STATUS:

VALID\*

DEPARTMENTAL ACTIONS:

NONE \*

CONVICTIONS:

NONE \*

FAILURES TO APPEAR:

NONE \*

ACCIDENTS:

NONE \*

\* \* \* END \* \* \*

616 113010 27 0069 VIR \$ 5.00