

COMPLAINT FOR PROTECTION FROM ABUSE
(G.L. c.209A) Page 1 of 2

COURT USE ONLY - DOCKET NO. _____

TRIAL COURT OF MASSACHUSETTS



<input type="checkbox"/> BOSTON MUNICIPAL COURT	<input type="checkbox"/> DISTRICT COURT	<input type="checkbox"/> PROBATE & FAMILY COURT	<input type="checkbox"/> SUPERIOR COURT	DIVISION _____
---	---	---	---	----------------

<p>Name of Plaintiff (person seeking protection) _____</p> <p>Plaintiff's Address. DO NOT complete if the Plaintiff is asking the Court to keep it confidential. See K. 4. below. _____ _____ _____ Daytime Phone No. () _____</p> <p>If the Plaintiff left a former residence to avoid abuse, write that address here: _____</p> <p>I <input type="checkbox"/> am over the age of eighteen. I <input type="checkbox"/> am under the age of eighteen, and _____ my _____ (relationship to Plaintiff) has filed this complaint for me. The Defendant <input type="checkbox"/> is <input type="checkbox"/> is not under the age of eighteen. To my knowledge, the Defendant possesses the following guns, ammunition, firearms identification card, and/or license to carry: _____</p> <p>Are there any prior or pending court actions in any state or country involving the Plaintiff and the Defendant for divorce, annulment, separate support, legal separation or abuse prevention? <input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, give Court, type of case, date, and (if available) docket no. _____</p>	<p>Name of Defendant (person accused of abuse) _____</p> <p>Def. Date of Birth _____ Defendant's Alias, if any _____</p> <p>Defendant's Address _____ Day Phone () _____</p> <p>Sex: <input type="checkbox"/> M <input type="checkbox"/> F</p> <p>Social Security # _____ Place of Birth _____</p> <p>Defendant's Mother's Maiden Name (first & last) _____</p> <p>Defendant's Father's Name (first & last) _____</p> <p>The Defendant and Plaintiff: <input type="checkbox"/> are currently married to each other <input type="checkbox"/> were formerly married to each other <input type="checkbox"/> are not married but we are related to each other by blood or marriage; specifically, the Defendant is my _____ <input type="checkbox"/> are the parents of one or more children <input type="checkbox"/> are not related but live in the same household <input type="checkbox"/> were formerly members of the same household <input type="checkbox"/> are or were in a dating or engagement relationship.</p> <p>Does the Plaintiff have any children? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, the Plaintiff shall complete the appropriate parts of Page 2.</p>
--	---

On or about (dates) _____ I suffered abuse when the Defendant:

<input type="checkbox"/> attempted to cause me physical harm	<input type="checkbox"/> placed me in fear of imminent serious physical harm
<input type="checkbox"/> caused me physical harm	<input type="checkbox"/> caused me to engage in sexual relations by force, threat of force or duress

THEREFORE, I ASK THE COURT TO ORDER:

1. the Defendant to stop abusing me by harming, threatening or attempting to harm me physically, or placing me in fear of imminent serious physical harm, or by using force, threat or duress to make me engage in sexual relations unwillingly.

2. the Defendant not to contact me, unless authorized to do so by the Court.

3. the Defendant to leave and remain away from my residence which is located at: _____
If this is an apartment building or other multiple family dwelling, check here

4. that my address be impounded to prevent its disclosure to the Defendant, the Defendant's attorney, or the public.
Attach Request for Address Impoundment form to this Complaint.

5. the Defendant to leave and remain away from my workplace which is located at: _____

6. the Defendant to pay me \$ _____ in compensation for the following losses suffered as a direct result of the abuse: _____

You may not obtain an Order from the Boston Municipal Court or a District or Superior Court covering the following item 7 if there is a prior or pending Order for support from the Probate and Family Court.

7. the Defendant, who has a legal obligation to do so, to pay temporary support for me.

8. the relief requested on page two of this Complaint pertaining to my minor child or children.

9. the following: _____

10. the relief I have requested, except for temporary support for me and/or my child(ren) and for compensation for losses suffered, without advance notice to the Defendant because there is a substantial likelihood of immediate danger of abuse. I understand that if the Court issues such a temporary Order, the Court will schedule a hearing within 10 court business days to determine whether such a temporary Order should be continued, and I must appear in Court on that day if I wish the Order to be continued.

DATE _____	PLAINTIFF'S SIGNATURE X _____	Please complete affidavit on reverse of this page
------------	----------------------------------	---

This is a request for a civil order to protect the Plaintiff from future abuse. The actions of the Defendant may also constitute a crime subject to criminal penalties. For information about filing a criminal complaint, you can talk with the District Attorney's Office for the location where the alleged abuse occurred.



ISSUES PERTAINING TO CHILDREN

A. RELATED PROCEEDINGS. Is there any proceeding that the Plaintiff knows of or has participated in which is pending or has been concluded in any Court in the Commonwealth or any other state or country involving the care or custody of the child or children of the parties? [] YES [] NO
If Yes, the Plaintiff shall complete and file with this Complaint an Affidavit Disclosing Care or Custody Proceedings as required by Trial Court Uniform Rule IV, and provide copies of documents required by the Rule. This Affidavit and related information are available from the office of the Clerk-Magistrate or Register of Probate of the Court.

B. RELATED PROCEEDINGS. Are there any prior or pending court actions in any state or country involving the Plaintiff and the Defendant for paternity: [] YES [] NO

C. CUSTODY. The Plaintiff may not obtain an Order from the Boston Municipal Court or a District or Superior Court for custody if there is a prior or pending Order for custody from the Probate and Family Court or Juvenile Court. [] I request custody of the following minor child or children of the parties:

Table with 4 columns: NAME, DATE OF BIRTH, NAME, DATE OF BIRTH

D. CONTACT WITH CHILDREN. I ask the Court to order the Defendant not to contact the following child or children unless authorized to do so by the Court:

Table with 2 columns: NAME, NAME

The specific reasons for this request are: _____

If the Plaintiff alleges that the Defendant has abused the above-named child or children, a separate Complaint may be filed on behalf of each child.

E. VISITATION. If the Plaintiff is filing this Complaint in the Probate and Family Court, the Plaintiff may request a Visitation Order. Such Orders are not available in other Courts. Regarding visitation, I ask the Court to [] permit visitation. [] order no visitation between the Defendant and our minor child or children. [] permit visitation only at the following visitation center: _____ to be paid for by _____ (name) . [] permit only visitation supervised by _____ (name) at the following times: _____ to be paid for by _____ (name) . [] order visitation only if a third party, _____ (name) , picks up and drops off our minor child or children.

F. TEMPORARY SUPPORT. The Plaintiff may not obtain an Order from the Boston Municipal Court or a District or Superior Court for temporary support if there is a prior or pending Order for support from the Probate and Family Court or Juvenile Court. [] I ask the Court to order the Defendant, who has a legal obligation to do so, to pay temporary support for any children in my custody.

DATE PLAINTIFF'S SIGNATURE X