

<b>APPLICATION FOR COMPLAINT</b>		<input checked="" type="checkbox"/> ADULT <input type="checkbox"/> JUVENILE	NUMBER	<b>Trial Court of Massachusetts District Court Department</b>	
<input type="checkbox"/> ARREST	<input type="checkbox"/> HEARING	<input type="checkbox"/> SUMMONS	<input type="checkbox"/> WARRANT	COURT DIVISION	
The within named complainant requests that a complaint issue against the within named defendant, charging said defendant with the offense(s) listed below.				Northampton District Court P.O. Box 657 - 15 Gothic Street Northampton, MA. 01061-0657	
DATE OF APPLICATION	DATE OF OFFENSE	PLACE OF OFFENSE			
9-20-02	9-14-02	Anytown, MA			

NAME OF COMPLAINANT <b>Iona Morton</b>		NO.	OFFENSE	G.L. Ch.
ADDRESS AND ZIP CODE OF COMPLAINANT <b>17 Hardy St Drewsville, MA 01000</b>		1.		
NAME, ADDRESS AND ZIP CODE OF DEFENDANT <b>Frank FILMORE 42 Ochs Ave York, MA 00001</b>		2.		
		3.		
		4.		

COURT USE ONLY →	A hearing upon this complaint application will be held at the above court address on	DATE OF HEARING	TIME OF HEARING	COURT ON ←
			AT	

**CASE PARTICULARS — BE SPECIFIC**

NO.	NAME OF VICTIM Owner of property, person assaulted, etc.	DESCRIPTION OF PROPERTY Goods stolen, what destroyed, etc.	VALUE OR PROPERTY Over or under \$250.	TYPE OF CONTROLLED SUBSTANCE OR WEAPON Marijuana, gun, etc.
1	Iona Morton	eyeglasses, jewelry, fine china	\$ 800	
2				

OTHER REMARKS: Frank was my boyfriend. He got mad when I broke up with him and started yelling. We were in my apt Sat. night @ 8pm (on 14th of Sept.). I told him to leave. He grabbed me, ripped off my necklace, my glasses + stomped them. He broke the china in my china closet by throwing it.

SIGNATURE OF COMPLAINANT  
*Iona Morton*

**DEFENDANT IDENTIFICATION INFORMATION — Complete data below if known.**

DATE OF BIRTH 3-31-69	PLACE OF BIRTH NY City	SOCIAL SECURITY NUMBER 012-34-3210	SEX M	RACE W	HEIGHT 6'1	WEIGHT 200	EYES blue	HAIR blond
OCCUPATION Construc. Worker	EMPLOYER/SCHOOL odd jobs	MOTHER'S NAME (MAIDEN) ?	FATHER'S NAME Philip Filmore					

↓ COURT USE ONLY ↓

DATE	DISPOSITION	AUTHORIZED BY
	NO PROCESS TO ISSUE <input type="checkbox"/> At request of complainant <input type="checkbox"/> Complainant failed to prosecute <input type="checkbox"/> insufficient evidence having been presented	
	PROCESS TO ISSUE <input type="checkbox"/> Sufficient evidence presented <input type="checkbox"/> Defendant failed to appear	TYPE OF PROCESS <input type="checkbox"/> Warrant <input type="checkbox"/> Summons returnable _____

Continued to: \_\_\_\_\_  
COMMENTS