

COMPLAINT FOR PROTECTION FROM ABUSE
G.L. c. 209A

DOCKET NO.

Massachusetts Trial Court



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| A | <input type="checkbox"/> Boston Municipal Court | <input type="checkbox"/> District Court | <input type="checkbox"/> Probate & Family Court | <input type="checkbox"/> Superior Court | DIVISION |
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| B | NAME OF PLAINTIFF (<i>person seeking protection</i>) | F | NAME OF DEFENDANT (<i>person accused of abuse</i>) | Defendant's Alias, if any Sex: <input type="checkbox"/> M <input type="checkbox"/> F |
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| C | <input type="checkbox"/> I am 18 or older. <input type="checkbox"/> I am under the age of 18 and _____ (<i>name</i>), my _____ (<i>relationship to Plaintiff</i>), has filed this Complaint on my behalf. <input type="checkbox"/> The Defendant is 18 or older. | G | The Defendant and the 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 are related to each other by blood or marriage; specifically, the Defendant is my: _____ (<i>relationship to Plaintiff</i>) <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. | |
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| D | To my knowledge, the Defendant possesses the following guns, ammunition, firearms identification card, and/or license to carry: _____ _____ |
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| E | Are there any prior or pending 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 <i>If so, list court, type of case, date, and docket no. (if available).</i> | H | Does the Plaintiff have any children under the age of 18? <input type="checkbox"/> NO <input type="checkbox"/> YES <i>If so, the Plaintiff shall complete the appropriate parts of Page 2.</i> |
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| I | On or about (<i>date</i>) _____ I suffered abuse when the Defendant: <input type="checkbox"/> Attempted to cause me physical harm <input type="checkbox"/> Caused me physical harm | <input type="checkbox"/> Placed me in fear of imminent serious physical harm <input type="checkbox"/> Caused me to engage in sexual relations by force, threat, or duress |
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| J | THEREFORE, I ASK THE COURT <input type="checkbox"/> 1. To order 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. <input type="checkbox"/> 2. To order the Defendant not to contact me, unless authorized to do so by the Court. <input type="checkbox"/> 3a. To order the Defendant to leave and remain away from my residence (<i>as listed on the Plaintiff Confidential Information form</i>). <input type="checkbox"/> 3b. To order the Defendant to leave and remain away from my workplace (<i>as listed on the Plaintiff Confidential Information form</i>). <input type="checkbox"/> 3c. To order the Defendant to leave and remain away from my school (<i>as listed on the Plaintiff Confidential Information form</i>). <input type="checkbox"/> 4a. To order that my residential address not appear on the order. <input type="checkbox"/> 4b. To order that my workplace address not appear on the order. <input type="checkbox"/> 4c. To order that my school address not appear on the order. <input type="checkbox"/> 5. To order the Defendant to pay me \$ _____ in compensation for the following losses suffered as a direct result of the abuse: _____ <input type="checkbox"/> 6. To order the Defendant, who has a legal obligation to do so, to pay temporary support to me. <input type="checkbox"/> 7. To order the relief requested on Page 2 of this Complaint pertaining to my minor child(ren). <input type="checkbox"/> 8. To order the following: _____ _____ <input type="checkbox"/> 9. To order 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. | |
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| DATE | PLAINTIFF'S SIGNATURE | Please complete the AFFIDAVIT, the PLAINTIFF CONFIDENTIAL INFORMATION form, and the DEFENDANT INFORMATION form. |
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This is a request for a civil order to protect against future abuse. 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. The actions of the Defendant may also constitute a crime subject to criminal penalties. For information about filing a criminal complaint, you may talk with the District Attorney's Office where the alleged abuse occurred.