
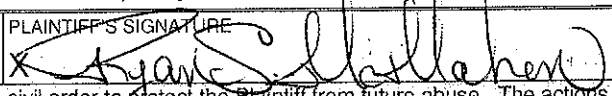


DEFENDANT INFORMATION FORM IN RESTRAINING ORDER CASES (Provided by Plaintiff)		DOCKET NO. - COURT USE ONLY <div style="font-size: 1.5em; font-family: cursive;">02RC 283</div>	TRIAL COURT OF MASSACHUSETTS
DEFENDANT'S NAME <div style="font-size: 1.2em; font-family: cursive;">JARED Remy</div>	DEFENDANT'S DOB <div style="background-color: black; width: 100px; height: 20px;"></div>	COURT DIVISION	
ATTENTION: PLEASE PROVIDE AS MUCH INFORMATION AS POSSIBLE. IF A PROTECTIVE ORDER IS ISSUED, THIS INFORMATION WILL HELP POLICE FIND THE DEFENDANT AND SERVE THE DEFENDANT WITH A COPY OF THE ORDER.			
OTHER NAMES USED BY THE DEFENDANT: not positive			
HOME ADDRESS Waltham MA 02451 <small>Number Street City State Zip</small>			
IMPORTANT: Apartment No. _____ Floor No. _____ Name on Door/Mailbox _____			
WORK ADDRESS Waltham High School, gym lower level <small>Name of Company / Employer</small> Waltham MA 02451 <small>Number Street City State Zip</small> Department _____ Title _____ Tel. No. Work Hours _____			
OTHER PLACES DEFENDANT MAY BE FOUND (Friends, bars, relatives, hangouts) <div style="font-size: 1.2em; font-family: cursive;">Mother's House Weston</div>			
BEST PLACE TO FIND DEFENDANT BEST TIMES <div style="font-size: 1.2em; font-family: cursive;">his House He's not working during day whenever</div>			
DEFENDANT UNDERSTANDS ENGLISH? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF NO, WHAT LANGUAGES?:			
DESCRIPTION FOR PURPOSES OF SERVICE <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Race white Eyes Hazel Hair Dark Brown Height 5.6/5.7 Weight 190 Build B9/MUSCULAR STALKY Other _____ (Beard, glasses, scars, tattoos, acne, hairstyle)			
PHOTOGRAPH AVAILABLE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Photographs are very helpful to police in identifying Defendants.)			
MOTOR VEHICLE: License Plate # _____ Year _____ Make _____ Model _____ Color _____			
DOES DEFENDANT HAVE: (describe very briefly)			
1. A history of violence towards police officers? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
2. A history of using/abusing drugs or alcohol? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes What kind? COCAINE, OXYCOTIN, PERICASETTE, MARIJUANA, ANYTHING IN PILL FORM.			
3. Access to guns, a license to carry, or possess a gun? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes What kind?			
4. Psychiatric/Emotional Problems? (Treated/Hospitalized?) <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes What kind? NOT SURE WHAT DIAGNOSIS IS, BUT SEES A DOCTOR AND IS ON MEDS.			
ANY OTHER INFORMATION WHICH MIGHT BE HELPFUL IN LOCATING THE DEFENDANT <div style="font-size: 1.2em; font-family: cursive;">He's ALWAYS HOME or at Mother's</div>			
PLAINTIFF'S NAME Ryan McMahon			
DATE	PLAINTIFF'S SIGNATURE <div style="font-size: 1.5em; font-family: cursive;">*Ryan McMahon</div>		

COMPLAINT FOR PROTECTION FROM ABUSE (G.L. c.209A) Page 1 of 2		COURT USE ONLY - DOCKET NO. 0290 283	TRIAL COURT OF MASSACHUSETTS	
A	<input type="checkbox"/> BOSTON MUNICIPAL COURT <input checked="" type="checkbox"/> DISTRICT COURT <input type="checkbox"/> PROBATE & FAMILY COURT <input type="checkbox"/> SUPERIOR COURT		DIVISION _____	
B	Name of Plaintiff (person seeking protection) RYAN MCMAHON		Name of Defendant (person accused of abuse) Jared Remy	
	Plaintiff's Address. DO NOT complete if the Plaintiff is asking the Court to keep it confidential. See K. 4. below. [REDACTED]		Def. Date of Birth _____ Defendant's Alias, if any _____	
C	Daytime Phone No. _____		Defendant's Address _____ Day Phone _____	
	If the Plaintiff left a former residence to avoid abuse, write that address here: _____		G WALTHAM, MA 02453 Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F	
D	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.		Defendant's Mother's Maiden Name (first & last) Philomena Remy	
	The Defendant <input type="checkbox"/> is <input type="checkbox"/> is not under the age of eighteen.		Defendant's Father's Name (first & last) Jerry Remy	
E	To my knowledge, the Defendant possesses the following guns, ammunition, firearms identification card, and/or license to carry: _____		H 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 _____	
F	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. _____		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.	
J	On or about (dates) _____ I suffered abuse when the Defendant: <input type="checkbox"/> attempted to cause me physical harm <input type="checkbox"/> caused me physical harm		I <input checked="" type="checkbox"/> placed me in fear of imminent serious physical harm <input type="checkbox"/> caused me to engage in sexual relations by force, threat of force or duress	
K	THEREFORE, I ASK THE COURT TO ORDER: <input checked="" type="checkbox"/> 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. <input checked="" type="checkbox"/> 2. the Defendant not to contact me, unless authorized to do so by the Court. <input checked="" type="checkbox"/> 3. the Defendant to leave and remain away from my residence which is located at: _____ <div style="margin-left: 40px;">If this is an apartment building or other multiple family dwelling, check here <input type="checkbox"/></div> <input type="checkbox"/> 4. that my address be impounded to prevent its disclosure to the Defendant, the Defendant's attorney, or the public. <div style="margin-left: 40px;">Attach Request for Address Impoundment form to this Complaint.</div> <input checked="" type="checkbox"/> 5. the Defendant to leave and remain away from my workplace which is located at: _____ <input type="checkbox"/> 6. the Defendant to pay me \$ _____ in compensation for the following losses suffered as a direct result of the abuse: _____ <div style="margin-left: 40px;">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.</div> <input type="checkbox"/> 7. the Defendant, who has a legal obligation to do so, to pay temporary support for me. <input type="checkbox"/> 8. the relief requested on page two of this Complaint pertaining to my minor child or children. <input type="checkbox"/> 9. the following: _____ <input type="checkbox"/> 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 07-18-02		PLAINTIFF'S SIGNATURE 		Please complete affidavit on reverse of this page
<small>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.</small>				

AFFIDAVIT

Describe in detail the most recent incidents of abuse. The Judge requires as much information as possible, such as what happened, each person's actions, the dates, locations, any injuries, and any medical or other services sought. Also describe any history of abuse, with as much of the above detail as possible.

On or about 9-18-02, 20 02, the Defendant

JARED REMY stated that he was going to kill me, Michelle and all my friends, that I was a [REDACTED], a [REDACTED], that he was going to make my life a living hell and that we would pay. He stated this after he keyed and slashed my friends' tires, he called the house 3 times, I kept hanging up on him. I called the police before he stated this, then a 2nd time after the threatening call.

The call was recieved At 1:15 AM.

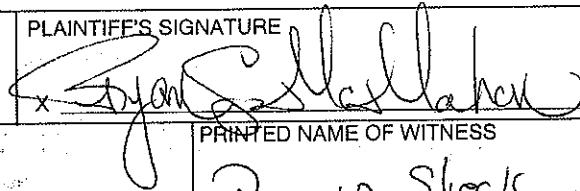
If more space is needed, attach additional pages and check this box: ☐

I declare under penalty of perjury that all statements of fact made above, and in any additional pages attached, are true.

DATE SIGNED

09-18-02

PLAINTIFF'S SIGNATURE

x 

WITNESSED BY

x Donald Sheek

PRINTED NAME OF WITNESS

Donald Sheek

TITLE/RANK OF WITNESS

Parro/Man