

DEFENDANT INFORMATION FORM AS PROVIDED BY PLAINTIFF G.L. c. 209A or G.L. c. 258E				DOCKET NO. (for court use only)		Massachusetts Trial Court 	
This information is requested to help police to identify and locate the Defendant in order to serve the Defendant with a copy of any restraining Order that is issued. Please provide as much information as possible.							
DEFENDANT'S NAME Marcus Mustard					DATE OF BIRTH 11/9/79		
OTHER NAMES USED BY DEFENDANT, IF ANY M'n'M					PLACE OF BIRTH Cavetown, VA		
MOTHER'S MAIDEN NAME (FIRST & LAST) Mary Custard			FATHER'S NAME (FIRST & LAST) Martin Mustard		SOCIAL SECURITY NO. XXX-XX-XXXX		
SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	RACE white	EYES brown	HAIR brown	HEIGHT 6'1	WEIGHT 195	PHOTO AVAILABLE? (very helpful for ID) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
BUILD big		OTHER PHYSICAL CHARACTERISTICS (beard, glasses, scars, tattoos, complexion, hairstyle) tattoos on wrists, shoulder (eagle and snake)					
DEFENDANT'S HOME ADDRESS (NO., STREET, CITY, STATE, ZIP) 100 Hop Street, Anytown, MA					DEFENDANT'S HOME TELEPHONE NO. 000-000-0000		
APT NO. 2	FLOOR NO. 1	NAME ON DOOR/MAILBOX Marcus Mustard		DOES DEFENDANT UNDERSTAND ENGLISH? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF NOT, WHAT LANGUAGES?			
DEFENDANT'S EMPLOYER/WORKPLACE Tallmart					WORK TELEPHONE NO. 000-000-0000		
WORK ADDRESS (NO., STREET, CITY, STATE, ZIP) 180 Anystreet, Anytown, MA 00000					TITLE associate		
DEPARTMENT auto and tires					WORK HOURS 9-5		
OTHER PLACES DEFENDANT MAY BE FOUND (friends, bars, relatives, hangouts) his brother's house: Marvin Mustard, 100 Skip Street, Anytown, MA					BEST PLACE TO FIND DEFENDANT work		
MOTOR VEHICLE LICENSE PLATE 000 000 MA	YEAR 1991	MAKE Oldsmobile	MODEL Cutlass	COLOR tan	BEST TIMES TO FIND DEFENDANT 8:30 am - 5 pm		
DOES DEFENDANT HAVE: (describe very briefly)							
A history of violence toward police officers?				<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			
A history of using/abusing drugs or alcohol?				<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES What kind?			
Access to guns, a license to carry, or possess a gun?				<input type="checkbox"/> NO <input checked="" type="checkbox"/> YES What kind? 1 shotgun, Hunting rifle, 1 pellet gun, F.I.D. card			
Psychiatric/emotional problems?				<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES What kind?			
ANY OTHER INFORMATION WHICH MIGHT BE HELPFUL IN LOCATING THE DEFENDANT He sometimes goes to the Dixie Pig Bar. He gets angry when he drinks.							
DATE SIGNED Nov. 29, 2011		PRINT PLAINTIFF'S NAME Lena Lionheart			PLAINTIFF'S SIGNATURE x 		