To keep other people from seeing what you entered on your form, please press the Clear
This Form button at the end of the form when finished.

DV-101(TC) Description of Abuse Case Number:

	This form is attached to DV-100(TC), Request for Domestic Violence Restraining Order.	
1	Name of person asking for protection:	_
2	Name of person you want protection from:	_
3	Describe the 2nd most recent abuse. a. Date of 2nd most recent abuse: b. Who was there? c. Describe how the person in ② abused you or your children:	
		_ _ _ _ _
		_ _ _ _
	d. Describe any use or threatened use of guns or other weapons:	_ _ _
	e. Describe any injuries:	
	f. Did the police or other law enforcement come? \[\] No \[\] Yes If yes, did they give you or the person in \(\begin{align*} \begin{align*} \) an Emergency Protective Order? \[\] Yes \[\] No \[\] I don't know The Emergency Protective Order protects \[\] You \[\] The person in \(\begin{align*}	



De	Describe other recent abuse.		
	Date of other recent abuse:		
	Who was there?		
c.	Describe how the person in (2) abused you or your children:		
_			
d.	Describe any use or threatened use of guns or other weapons:		
e.	Describe any injuries:		
f.	Did the police or other law enforcement come?		
	If yes, did they give you or the person in ② an Emergency Protective Order? ☐ Yes ☐ No ☐ I don't known		
	The Emergency Protective Order protects		
	Attach a copy of the Emergency Protective Order if you have one.		
De	scribe other abuse against you or your children.		
	Check here if you need more space. Attach a sheet of paper and write "DV-101(TC)—Description of Abuse"		

(Rev. 03/17)

Description of Abuse (Domestic Violence Prevention)

DV-101(TC), Page 2 of 2

Case Number: