

Sample for Reference Purposes Only. Forms have bilingual format for your convenience, but must be completed and filed with the court in English. 表格样本，仅供参考。为了提供便利，表格采用双语格式，但向法院提交的表格必须用英语填写。



CIRCUIT COURT DISTRICT COURT OF MARYLAND FOR

巡回法院 地区法院——马里兰州

City/County
市/县

Located at
地址

Case No.
案件编号

Court Address
法院地址

vs.
诉

Petitioner
原告

Respondent
被告

ADDENDUM TO PETITION FOR PEACE ORDER
治安保护令下达请愿书附件

Failure to provide information on this addendum may prevent law enforcement from processing the court's Peace Order. This may endanger your safety or the safety of another protected party. Please provide as much information as possible.
未在本附件上提供相关信息可能会妨碍执法部门执行法院的治安保护令。这可能会危及您或其他受保护方的安全。请提供尽可能多的信息。

DESCRIPTION OF RESPONDENT
被告阐述

Full Name: 全名:				Date of Birth: 出生日期:		Approximate Age: 大致年龄:	
Race: 种族:	Sex: 性别:	Height: 身高:	Weight: 体重:	Hair Color: 头发颜色:	Eye Color: 眼睛颜色:	Skin Tone (Light/Medium/Dark): 肤色(浅/中/深):	
Scars, Tattoos (where on body and description): 疤痕、纹身(位置和描述):							
Home Address: 家庭住址:							
City, State, Zip: 城市、州、邮编:							
Telephone/Cell Phone Number: 电话/手机号码:							
Employer: 雇主:						Work Hours: 工作时间:	
Work Address: 工作地址:							
City, State, Zip: 城市、州、邮编:						Telephone Number: 电话号码:	
Vehicle Make: 车辆品牌:			Model/Color: 型号/车身颜色:		Year: 年份:	Tag #: 车牌:	
Weapons: 武器登记:							

Other locations or information about Respondent:
关于被告的其他位置或信息:

PETITIONER
原告
(Person Requesting Assistance)
(请求援助的一方)

Full Name: 全名:		Date of Birth: 出生日期:		Age: 年龄:
Race: 种族:	Sex: 性别:	Height: 身高:	Weight: 体重:	

INFORMATION ABOUT OTHER PERSONS FOR WHOM PETITIONER REQUESTS RELIEF
原告请求救济的其他对象的相关信息

Full Name: 全名:	Race: 种族:	Sex: 性别:	Date of Birth: 出生日期:	Weight: 体重:	Approx. Age: 大致年龄:
Full Name: 全名:	Race: 种族:	Sex: 性别:	Date of Birth: 出生日期:	Weight: 体重:	Approx. Age: 大致年龄:
Full Name: 全名:	Race: 种族:	Sex: 性别:	Date of Birth: 出生日期:	Weight: 体重:	Approx. Age: 大致年龄:
Full Name: 全名:	Race: 种族:	Sex: 性别:	Date of Birth: 出生日期:	Weight: 体重:	Approx. Age: 大致年龄:

Petitioner's Signature: _____
原告签名: _____

Date: _____
日期: _____

Petitioner's Telephone Number: _____
原告电话号码: _____