	RECEIVED		•
· .	AUG - 3. 2020		· :
Judge Time	ALOU G. LUZG		•
Hours Minutes PARYLAN CIRCUIT COTTET COTTET			•
CIRCUIT COURT DISTRICT	COURT OF MAR	YLAND FOR	Gy/County
Located at	· · · · · · · · · · · · · · · · · · ·	Case No. <u>SD</u>	1065-20
(NOTE: Fill in the following, checking the appropr	Address iate boxes. Petitione	rs need not eive an addres	s ildoing so risks
further abuse of reveals the confidential address of			
paper, ask the clerk) INNITER VASQUEZ Felitioner	vs. <u> Ki</u>	mar Armondo A	brigo Garcia
450) Hirchtree, land	<u></u>	Di Birilifice (gnl
Street Address, Apt. No. 100 70748 Home: 443-5	J5-2633 Ten	olo this mo 2014	8 Home: 413-57.74-5
City, State, Zip Work: Telephone Number	City, Sta		Work: Telephone Number(s)
PETITION F	ÖR PROTECTI	ON FROM .	
	ILD ABUSE [ily Law § 4-504	I VULNERABLE AŬ 1	ULT ABUSE
1. I am: Othe current or former spouse of the resp	•	•	Japerson related to
the respondent by blood, marriage, or adoption;	•	7	
person eligible for relief who resides or resided with		-	·
within 1 year before the filing of the petition; a v	_	_	• •
the respondent; or 📐 an individual who has had a se	/		•
the filing of the Petition.	•	1	~
2. I want relief for Mayself Minor child 🗌 v	ulnerable adult, from	abuse by KIMOY	Thire GO.
The Respondent, whose present whereabouts (if kno	wn) are		LenteRed Sogget
	miter Vasciu		· .
on or about, <u>06103 2020, 07125130 check</u> a	ll that apply.) 🎉 lợi	cking \square punching \square	choking/strangling
Aslapping shooting rape or other sexual off			
Ithreats of violence Imental injury of a child Dother VIV 1/26	detaining against v	rill □-stalking □ biting	□ revenge pom
Give specific details of what happened, when and wi	here it happened, and	l any injuries sustained):	1
Triday Aug 3,2020 my husbo		<u>phine around</u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ind in-the marning he wanted		nit car but 1	fold him I
yas going to go not with nupstrives to make food for mi	V - 10	he turned off	ANTIF TIMENT
. (If the victim is a child or vulnerable adult, fill in	the following): Lam	asking for protection for a	child
wilnerable adult whose name is 11/4/29	rejo Xav	lex lvejo, \$	Kilmar Hbreg
at this time the victim can be found at My da	d baby	y is with K	ulmar Horeyo
am State's Attorney DSS a relative] an adult-living in i	he home.	
. The person(s) I want protected are (include yourse		•	
Tennifer Vasavez 18	3 20 LED 1995	Relationship to WIFE.	Respondent
aleuza Treio	7/83 / 2014		anter
ravier Treje	1 26 2015	Step SOP	
almar Abrecyo	3 11 12019	<u> </u>	.
		· · · · · · · · · · · · · · · · · · ·	

DISTRICT COURT OF YLAND FOR	
	City/County
Located at	Coun Address
Respondent's Name	Case Number
PETITION FOR PROTECTION CONTINUATION S	SHEET
nd told me I wasn't going to gook an	thing for him until I gave him my
ir key. then I tay to go back to the	basement + he had locked 20 f
y kids in the room, and the baby was	Sleep in the crib. I could hear them
rying. I looked for help but no me u	as home. I then went to the car & found
phone wax able to call 911. I try to	return inside bothe locked all doors.
ter 5 min waiting for police he opened:	the door and told me to give him the
exs. I again try to make food for my	lade because I doud hour than crying,
yearing. I told him to Letting me co	downstairs but he blocked the door,
want to look off the undow + 1 sails	someone walking lopen the door +
eiled for help when my husband theavo	ho crabbod me book inside - slapped
2. Peline came he actted violant w	17th tim & Broke my phone infront
f officer. This is not the 1st fings i	+ been a couples of occasion he
ikes my phone and car + im left i	aithout be able to call anworl.
have photos of all the britises be	south on my house in my house
s broken. TV's my son's tablet	my car windshield, phones
oils. me a my kids are affaid	now toleron His kicked me,
	2. Threaten me , latso.
, 11	ex-mither-in-law that even
ne kills me no one can do ani	
- 10- 17- 17- 17- 17- 17- 17- 17- 17- 17- 17	

)V/PO 1C (10/2010)

•	•		c	Case No			· ,
			٠	/s	•		
	e person(s) I want prostyear:	otected now lives, BIVCH-1/20		with the Responden	1/1 main =		iring
-	Dare I are not a	iditional persons li	ving in the hor	ne.			
6. Ik	/ now of the following e: paternity, child sup	court cases involv	ing me, of the	person I want prot			les
	Court	Kind of Cas		Year Filed	- •	Status (if you kno	w) .
	• • • • • • • • • • • • • • • • • • • •		 -				
	·		· 	· ·			<u>.</u>
			•				
7. □ alleged	I have received a fi in this petition, and					one (1) year of the	abuse
	Date issued			. · 🔲 Date expire	ed		
	Location where issu	red		City/County/Stat	 		· -
8. Des 12144	cribe all past injuries	THE COY,	DUC 3	rictim, and give dat	e, if known! <u>VOV</u>	2019 - U Lhair in:	<u>nao</u> me Hae car
-,-,-	ero draggeo			eaving me			J
	Respondent owns of				March 202	20 pished	me agein
			<u> </u>	- 		जाता. जाता.	
I w	ant the court to orde NOT to abuse or the Dally Za T	r the Respondent: (reaten to abuse	NOTE: Petition Jennife	ner need not give a	an address if doin KIMCV - PILL)		abuse.)
X	NOT to contact, att	empt to contact, or	harass	ennifer i/	nsques		
A	NOT to go to the re	sidence(s) at 45	01 Birc	htuee lang	Templo -	Hils, mb	10748.
	NOT to go to the so	hool(s) at	•	Name of school	l and address		•
	NOT to go to the ch	ild care provider(s))	Name of child	care provider and addre	· · · · · · · · · · · · · · · · · · ·	
	NOT to go to the we	ork place(s) at		Na	nne(s)		
							

•	Case No
]	
To leave the home at 4501	Birchthee lane Timple, Hills, MD 20748
and give possession of the home to	Address
The name(s) on the dead or leave or	re: Johnster Vasquez.
To turn over firearm(s) to a law en	· · · · · · · · · · · · · · · · · · ·
To go to counseling Adomestic	
	ly Maintenance (may be taken from Respondent's paychest).
11. I also want the Court to order:	· · · · · · · · · · · · · · · · · · ·
Custody of Kilmay Al	exander Abreco Vasquez
be granted to UNNIER	Vice 127
	jointly-owned vehicle be granted to
•	Nexte
	Description of vehicle
Temporary possession of the pet(s)	Name and Description
be granted to	Name
In the final order, the following addi	tional relief necessary to protect
from abuse:	s does maganism source
<u> </u>	<u>. </u>
12. (Fill in only if you are seeking Emergence	by Family Maintenance.) The Respondent has the following financial resour
Income from employment in the amount of \$	every week 2 weeks month
Other	<u> </u>
Source of employment income.	
	Name and address of source and amount(s) received:
income from other source	Name and address of source and amount(s) received
The Respondent also owns the following pro	perty of value: Automobile(s) \$
Home \$	Bank Account(s) \$
•	Estimated Value
Other:	l Estimated Value
I solemnly affirm under the penalties of perjunknowledge, information and belief.	y that the contents of the foregoing Petition are true to the best of my
Cit is	
Date	Pellioner
I have filled in the Addendum (Description	1 -
f von believe that you have been a victim of a	NOTE buse and that there is a danger of serious and immediate injury to you, you
nay request the assistance of a police officer of	or local law enforcement agency.
The law enforcement officer must protect you isk, accompany you to the family home so that personal effects required for you and your child	from harm when responding to your request for assistance and may, if you to you may remove clothing and medicine, medical devices, and other dren, regardless of who paid for them.
fou are entitled to request that the address and or shielding at the filing of this application.	telephone number of a victim, a complainant, or a witness be considered
il a victim of non-datty witness is subject to d	telephone number, date of birth, e-mail address, and place of employment locking in accordance with Md. Rule 16-910. A person who causes be placed in a judicial record shall give the clerk written or electronic remote access under Md. Rule 16-910.
10 To 00 TO 10 10 10 10 10 10 10 10 10 10 10 10 10	·

	•	ļ		,		•
waren CIRCI	UIT COURT 🗀 DIS	. STRICT COUR	T OF MAI	RYLAND FOR	. '	
Located a				Case N	C	ity/County
Som for	Vasavei ·	Court Address	12:	i . Λι	real)	
Annua -	ADDENDUM TO	DETITION E	CA DECT	Rest	ondent /l	<u> </u>
	(DESC	RIPTION OF	RESPON	DENT)		
Failure to provide Protective Order.' much information	information on this A This may endanger yo as possible	ddendum may pour safety or the s	revent law e afety of and	nforcement from ther protected p	n procession processio	ng the Court's se providé as
		CRIPTION OF (Alleged Ab		DENT		
Full Name: Kilm	ar Abrecio		ate of Birth:	995 Approx	cimate Age	
Race: Sex:	Height:	Weight: H	lair Color: 1	ye Color: Skin	Tone (Light	/Medium/Dark);
Scars, Tattoos (where	on body and description):	<u> </u>	rown !	<u>promul</u>	Light	
Home Address:	Ster elbow,	Kids gõing	.up .sto	ivs,	·	
City, State, Zip:	chtree Land	<u>.</u> .		· 	· · ·	
Telephone/Cell Numb	imple Hills	1 4 WIN 500	748	·		
Employer:	<u>" 1443- 774</u>	<u>1- 5187.</u>			1977-1	
		!	·		Work	: Hours:
Work Address:	<u> </u>					•
City, State, Zip:	•	i	•		Telephone	Number:
Vehicle Make:	Model/Color:	Year:	Tag #:	·	State:	
Weapons:			1	 		
Other locations or info	rmation about Responder	it:	***	····		<u>(1000-2000) (1888)</u>
}		· · ·		 .		
<u> </u>		·			——	
-	(Pe	PETITIO	NER LAssistance	<u>=)</u>		
Full Name:	^]. D g	te of Birth:	Age:		
Race: J Sex:	iter Vasquel	Weight:	2/20/2	995 6	14	
1		164		·		·
INFORMA	TION ABOUT OT	Race: , _			_	TED TApprox. Age:
Full Name: Daley 7	, Trejo	1 <i>TT</i>	1.7 (Date of Birth:	Weighte	(a)
Full Name: -V	Tieio	Race:	$ \sim$ \sim \sim	Date of Birth:	Weight:	Approx. Age:
Full Name: Kilmar F	Ybre GO	Race: ++	Sex:m	Date of Birth:	Weight:	Approx. Age:
Full Name:		Race:	Sex:	Date of Birth:	Weight:	Approx. Age:
h		}).	<u> </u>	l	18/22	
Petitioner's Signat	- (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	19-525- (0/422	Date:_(10/03	120,70
Petitioner's Teleph	\bigcirc	<u> 13 -5,75 - 7</u>	yw & O	_		· · ·
<i>ር</i> ሳር ክረ ከነን በበ1 ፈ /	Day 07/2010\	•			•	

RECEIVED
AND 1 T SOOD
AUG 1 1 2020 CIRCUIT COURT DISTRICT COURT OF MARYLAND FOR
Located at Case No 050 SP 010 W 700
Jennifer Vasquez vs. Klimy Abrego Name of Petitioner on Original Court Order vs. Klimy Plane of Respondent on Original Court Order
Name of Petitioner on Original Court Order Warne of Respondent on Original Court Order 4501 Byrchtyce One
PETITION TO MODIFY ARESCIND EXTEND PROTECTIVE ORDER
/1FQHBIV LOW V 4=3U/1
I, Jennifer VCSquez, am the respondent respo
I ask this court to: modify the Protective Order in this case dated as follows:
as joilows.
Management
My reasons are:
rescind the Protective Order in this case dated 08 03 20 20
My reasons are: (NY SM TOYNS I today 88/11/2020 and his tamily
want to be in my son birthday, his also agreed to continue
Consulting and of not his willing to sign allvovice paper
extend the Protective Order up to six (6) months for good cause. U
extend the Protective Order up to two (2) years due to a subsequent act of abuse. I want relief for
myself minor child vulnerable adult from abuse by
☐ The respondent committed the following acts of abuse against
on or about, (check all that apply) by: kicking punching choking/strangling slapping shooting rape or other sexual offense (or attempt) hitting
with object \square stabbing \square shoving \square threats of violence \square mental injury of child \square detaining
against will stalking biting revenge porn other
The details of what happened are: (Give specific details of what happened, when and where it happened, and any injuries sustained):
M 11/2020
Date Signature 450) Brice lettre 1 000
Street Address (unless confidential) 525
JUSQUELO COM Temple Hells, MD 20748 Work 443- West 30
CERTIFICATE OF SERVICE
I hereby certify that on the day of,, I mailed a copy of this petition to:
Name and Address
Name and Address
Date Signature

	Case No.	Date	<u> </u>
· .	ORDER	· .	
After consideration of the p	petition, it is this Zu day of	f August Month	_, <u>20</u> ;
this matter be schedule	ed for a modification hearing.	_	
· Dinis matter be schedule	ed for a hearing to rescind.	•	
	ed for a hearing to extend with Order is to remain in full force		
the petition is denied b	ecause	<u>.</u>	- 141
·			<u> </u>
	·		٠.
		XAI Q	BP.







DISTRICT COURT OF MARYLAND FOR PRINCE GEORGE'S COUNTY

COURTHOUSE, 14735 MAIN ST., UPPER MARLBORO, MD 20772

Case No. 0502SP010652020 Date: 09/24/2020 10:15 a.m.

JENNIFER VASQUEZ VS KILMAR ARMANDO ABREGO GARCIA ORDER OF DISMISSAL OF PETITION FOR PROTECTION

Nobody appeared and no petition or any other evidence was considered, the court makes the following findings:

Petition is Dismissed

PETITIONER FAILED TO APPEAR

Date: 09/24/2020

Genela Hand Jan

0BQ

JUDGE DONNAKA VARNER LEWIS

ID No.

RECEIVED
AUG 1 1 2020
CIRCUIT COURT DISTRICT COURT OF MARYLAND FOR
Case No 0500 SP 010 05 Q 06
Junifer Vasquez vs. Klimy Ahreaz
4501 Birchtree Lane 4501 Birchtree I and
Liny State, 2p Hills, MD 20148 Home: 443-525- Temple Hills, MD 20148 Home: 443-774-51
PETITION TO MODIFY MRESCIND EXTEND PROTECTIVE ORDER (Family Law § 4-507)
I, Jennifer Varquez, am the respondent petitioner in the above entitled case. I ask this court to:
modify the Protective Order in this case dated as follows:
My reasons are:
Prescind the Protective Order in this case dated 08 03 20 20
My reasons are: OUY SM turns I today be 11 2020 and his family
want to be in my son nirthday, his also agreed to continue
CONSULTING and Composite in the part of the sign divoval paper of extend the Protective Order up to six (6) months for good cause.
My reasons are:
Output the Protective Onder up to true (2) years due to a subsequent set of share Young will for
extend the Protective Order up to two (2) years due to a subsequent act of abuse. I want relief for myself minor child vulnerable adult from abuse by
☐ The respondent committed the following acts of abuse against
on or about, (check all that apply) by: \[\begin{array}{c} \text{Name} \\ \text{punching} \end{array} \]
□ choking/strangling □ slapping □ shooting □ rape or other sexual offense (or attempt) □ hitting
with object stabbing shoving threats of violence mental injury of child detaining
against will ☐ stalking ☐ biting ☐ revenge porn ☐ other
The details of what happened are:(Give specific details of what happened, when and where it happened, and any injuries sustained):
N 11 2020
Street Address (unless confidential) Street Address (unless confidential)
JVasque 2326 Oychon com Temple Halls, MD 20748 Work: 4413-4555
CERTIFICATE OF SERVICE
I hereby certify that on the day of,, I mailed a copy of this petition to:
Name and Address
Name and Address
Date

	Case No Date
	ORDER
	After consideration of the petition, it is this Zu day of duyust, 20,
ORI	DERED that:
	this matter be scheduled for a modification hearing.
	This matter be scheduled for a hearing to rescind.
	☐ this matter be scheduled for a hearing to extend within 30 days from the filing of this petition and the current Protective Order is to remain in full force and effect until the hearing on this petition to extend is held.
_	☐ the petition is denied because
	Chall asp.

DISTRICT COURT OF MARYLAND FO	R Prince	Seorge	's County
Located at 14735 Main St.	upper	Case No. O. 6	38P010652
STATE OF MARYLAND OR	rariboro, A		
Vosquez, Jennifer Full Name of Plaintiff(s)	vs. Abre	Go KIN Full Name of De	nar Arma fendant(s)
REQUEST FOR CD RECORDING / TR	ANSCRIPT / ELE	CTRONIC RE	CORDING
NOTE TO APPLICANT: CD Recording Fee due in advance is \$15.00 per case. Requests are processed on a first come first served basis Cases heard more than three (3) years ago may not be av Transcript Written transcripts are only provided in accordance with A \$75.00 deposit in advance is required. Transcript costs requestor. Electronic Recording Recording delivered by e-mail using Citrix ShareFile. Fee due in advance is \$10.00 per case. Requests are processed on a first come first served basis	(no exceptions). vailable. MD Rule 7-102(b). s are \$3.00 per page. A	,	,
 Cases heard more than three (3) years ago may not be av 	ailable.		
PLEASE PROVIDE THE FOLLOWING COURT INFORMA	ATION: (Check one be	ox below and inclu	at Krownia Gray/LT
Trial Date 8/3/2020			
	ourtroom		
Court Location Upper Marlboro Ju	idge AAA C	lark - Ed	wards
☐ DISTRICT COURT COMMISSIONER			
Proceeding DateC	ommissioner Name		
Commissioner Location Maryland Rule 16-502 provides in part that upon written recustodian of an official recording shall make a copy of the an order of court, a person who receives a copy of an electro additional copy of the recording, give, or electronically transsubsection (g)(3) of this Rule. Maryland Criminal Procedure proceeding in a criminal matter. By my signature, I acknowledge and agree that this record electronically transmitted to any person, and that any wi	udio recording availal not be recording shall not be smit the recording to a service § 1-201 proverding will not be brouldful violation may be	ble to any person. ot make or cause t any person not ent rides that a person adcasted, copied	Unless authorized by to be made any titled to it under may not broadcast any or otherwise
REQUESTED BY:	OPTIONAL	1100	l (-M)
Juliet Macur NY Times	Please mail to (if d	unerent from addre	ss snown on lett):
1627 I St. NW		Name	
Washington be 2006	St	reet #	Apt #
9(7) 2 2 State Zip	City	State	Zip
Telephone 4/22 (2)		Telephone	
Signature of Applicant Date	Signature o	f Applicant	Date
IF ELECTRONIC RECORDING REQUESTED:			
E-mail address for electronic recording information to be sent:	Macyf	renal	imes.com
DCA-119 (Rev. 12/14/2020)		E-mail	-

Request No. 574018 DISTRICT COURT OF MARYLAND FOR 35 Main St. Ste. 173B UM, MDDPTTO Case No. 05-02-SPO 1065-2020 Full Name of Plaintiff(s) Full Name of Defendant(s) REQUEST FOR CD/TRANSCRIPT NOTE TO APPLICANT: If balance due is not paid in a timely manner, the debt will be transferred to the Central Collection Unit for possible enforced collection. RECEIVED APR 2 3 2025 KB. Signature of Applicant COURT INFORMATION Court Location Appeal Date (If Applicable) ___ Atty. for Pln. DISTRICT COURT COMMISSIONER INFORMATION Commissioner Office Proceeding Date Commissioner CD Proceeding(s) Information CD Proceeding(s) Information TD ______ Beg ____ End ____ | TD ____ Beg ____ End ____ TD Beg End TD _____ Beg ____ End ____ TD _____ Beg ____ End ____ TD _____ Beg ____ End ____ TRANSCRIBING DEPARTMENT COMMENTS _____ Transcriber Start Date _____ End Date ____ Proofreader Start Date ____ End Date Transcriber Proofreader INVOICE CD(s)......\$ Pages @ \$3.00 per page.....\$______ Less Deposit.....\$ Dalamas Dua