COMMONWEALTH OF MASSACHUSETTS DEPARTMENT OF THE TRIAL COURT

	Palmer Division	
BRIAN JOHNSON)		
PLAINTIFF)		
v. (
PETER FREI		20
DEFENDANT)		₹C
COMPLAIN		<u></u>
1. The Plaintiff, Brian Johnson, is a	n individual residing at 6⊅ Staffo	
Road, Holland, Hampden County, Massachuse	etts ("Johnson").	

- The Defendant, Peter Frei, is an individual residing at 101
 Maybrook Road, Holland, Hampden County, Massachusetts ("Frei").
- On February 19, 2011, Frei surreptiously recorded Johnson and others by utilizing an audio recording device.
- Frei surreptiously recorded Johnson and others without informing
 Johnson or securing Johnson's permission.

COUNTI

Violation of Mass. General Laws, c. 272, §99

- Johnson repeats, realleges and reiterates the allegations contained
 in Paragraphs 1 through 4 as if fully set forth herein.
- Frei's surreptious recording of Johnson and others violated G.L. c.
 272, §99.
- 7. As a result of Frei's violation of G.L. c. 272, §99, Johnson has suffered damages.

Brian Johnson, the Plaintiff, hereby requests that this Honorable Court:

- 1. Enter judgment in his favor on each Count in this Complaint;
- 2. Award actual damages;
- Award punitive damages;
- Award reasonable attorney's fees and costs incurred in this matter;
 and

5. Award such other relief as this Court deems appropriate.

Respectfully submitted,

The Plaintiff, Brian Johnson, By his attorney,

CRIMIN X

Tani E. Sapirstein, Esq.
BBO No. 236850
Sapirstein & Sapirstein, P.C.
1350 Main St., 12th Floor
Springfield, MA 01103
Tel. (413) 827-7500
Fax (413) 827-7797

Dated: Juneq, 2011

WHY PLYYED

Uniform Form DCM-13

Summons

Commonwealth of Massachusetts District Courts of Massachusetts

	~	****	, vinzzni,	MALTA		
Hampd	en, ss					
Brian	Johnson					
V .		>	Civil Actio	on No. <u>114</u>	3CV293	
Peter	Frei	,)				*
		SUMMON	<u>S</u>			
		(Rule 4)				
To defer	_{ndant} Peter Frei		of 101 M		Rd., Holl	and, MA
You are he attorney), blaint which the day Clerk of the you fail to be the demandary out the country out the c	(name) reby summoned and required whose address id 350 Main ch is herewith served upon you of service. You are also require his court either before service meet the above requirements, and in the complaint. You need otherwise provided by Rule 13 may have against the plaintiff ster of the plaintiff's claim or you as Patricia T. Poehl	St. Spr u, within 20 ced to file your upon plaintiff judgment by I not appear p (a), your ans which arises of u will be barre	ingfiæld lays after server answer to the f('s attorney), default may be bersonally in co wer must star out of the trand	pMAf All A rice of this su the complaint or within 5 to rendered a court to answ the as a count saction or occ g such claim	ein, plainting wer to the commons, exclusion the office of days thereafte against you for the complainer the complainer that is in any other actions.	om- sive the or. If the int. aim
(SEAL)			1	Clas /h	erk	nex
Note: (1) (2)	When more than one defendant is a separate summons is used for eac The number assigned to the complain summons before it is served.	h defendant, ea	ch should be ad	dressed to the	particular defend	lant.
	RET	TURN OF SE	RVICE			
On	, I served a con	by of the wit	nin summons	s, together w	ith a copy of tl	he ·
the Sh	eriff					



Office of

Hampden County • 1170 Main St. • P.O. Box 5005 • Springfield, MA 01101-5005 • (413) 732-5772

June 14, 2011 Hampdey, settify and return that on 6/13/2011 at 10:36AM I served a true and attested copy of the SUMMONS, COMPLAINT & STATEMENT OF DAMAGES in this action in the following manner: By leaving at the last and usual place of abode of PETER FREI, , to wit: 101 MAYBROOK Road, , HOLLAND, MA 01521, and by mailing 1st class to the above address on 6/13/2011. Attestation x 2 (\$10.00), Conveyance (\$4.50), Travel (\$17.28), Basic Service Fee (\$20.00), Mailing (\$3.00) Total Charges \$54.78

Deputy Sheriff DONALD P. CANTWELL

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One-Trial System

D. Reasonable anticipated future medical and hospital expenses. E. Reasonably anticipated lost wages: F. Other documented items of damage (Describe): G. Brief description of Plaintiff's injury, including nature and extent of injury (Describe): For this form, disregard double or treble damage dains; indicate single damages only. TOTAL: CONTRACT CLAIMS AMOUNT Provide a detailed description of dains(s): For this form, disregard double or treble damage dains; indicate single damages only. \$ \$ ATIORNEY FOR PLAINTIFF (OR PRO SEPLAINTIFF): Defendant Sname And Address: Total: \$ ATIORNEY FOR PLAINTIFF (OR PRO SEPLAINTIFF): Defendant Sname And Address: Total: Signature Date 236850 101 Maybrook Road					
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