		STATE O	F VERMONT				
UPERIOR COURT Unit				Doe	cket No.	FAMIL	Y DIVISIO
nor Child's Name		Child's DOB	Defendant's Name			DO	3
In re: Name of person filing on behalf of child		DOB	_				
		Defendant's Stra	ant Address		City State	7in	
	Defendant's Street Address		City, State, Zip				
AFFI	DAVIT IN	SUPPORT	OF COMPLAINT	FOR CHII	.D		
support of the claims made in my	-	and subject	to the penalties for	perjury, I st	ate the fo	llowing fac	cts to be
ue to the best of my knowledge ar	nd belief.				Date		Time
1. The most recent incident that	t causes me	e to ask for a	n order happened oi	n or about		at	
Town, State	when	Name of pe			llowing to the minor child		
າ   Describe what happened below. Be speci		s the act or thre	eat of violence? Where di	named ab		as there? Wa	ıs a weanon
					Attach a s	eparate she	et if necesso
2. Is the incident described abov If your answer is No, please fil			_	efendant?			
The most serious incident that				Date			Time

8/14 Page 1 of 3

	Town, State	(Describe what happened below. Please be specific: What was the act or threat of violence? Where
in		did it happen? Who else was there? Was a weapon involved? Was the child or anyone else injured? What were the injuries?)
		what were the injuries?)
		Attach a separate sheet if necessary
		Actually a separate sheet if necessary
3.	Other past incidents	of serious violence or threats that support my request for an Order include:
		s of serious violence or threats that support my request for an Order include:  When and where it happened, who else was there, and details about any injuries resulting or weapons used.)

8/14 Page 2 of 3

				Attach a separate sheet if necessary	
Do you believe tha	t the defendant		ther children in the househo	om the defendant? □ Yes □ No old? □ Yes □ No	
<b>5.</b> Is there an existing the complaint? ☐ Yes If yes, please fill in the in	□ No		ling involving you, the Defer	ndant and/or the child named ir	
		e of Case	Name of Court And State	Docket Number And Date Filed	
Divorce/Separation Civil Union Dissolution Parentage					
Relief From Abuse					
Protection Order Criminal					
Guardianship					
Probate					
Juvenile					
I baraba arraga		:f	:- t t th h t f l.	and the second best	
i nereby swear o	or affirm that the	Signature of Plaintiff	e is true to the best of my ki	_	
		Signature of Flamilin		Date	
		Printed Name			
Signed and swor	n before me:				
	Date	Signature of Notary	y Public	Expiration Date	

NOTICE: This Affidavit will be served on Defendant with your Complaint.

## **WARNING**

MAKING FALSE STATEMENTS IN THIS AFFIDAVIT IS A CRIME SUBJECT TO A TERM OF IMPRISONMENT OR A FINE, OR BOTH AS PROVIDED BY 13 V.S.A. §2904.

8/14 Page 3 of 3