





*Attach a separate sheet if necessary*

**4.** Do you feel that the child named above is in **immediate** danger of further abuse from the defendant?  Yes  No  
 Do you believe that the defendant poses a danger to other children in the household?  Yes  No  
*If you checked yes to either question, please explain why.*


**5.** Is there an existing order or a pending court proceeding involving you, the Defendant and/or the child named in the complaint?  Yes  No  
 If yes, please fill in the information requested below:

Type of Proceeding	Name 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			

<b>I hereby swear or affirm that the information above is true to the best of my knowledge and belief.</b>		
	Signature of Plaintiff	Date
	Printed Name	
<b>Signed and sworn before me:</b>		
	Signature of Notary 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.**