



**STATE OF RHODE ISLAND JUDICIARY**

**FAMILY COURT**

**COMPLAINT**

FOR DIVORCE

FOR DIVORCE FROM BED AND BOARD

<b>Plaintiff</b>	<b>Civil Action File Number</b>
<b>Defendant</b>	

<input type="checkbox"/> Murray Judicial Complex Newport County 45 Washington Square Newport, Rhode Island 02840-2913 (401) 841-8340	<input type="checkbox"/> Noel Judicial Complex Kent County 222 Quaker Lane Warwick, Rhode Island 02886-0107 (401) 822-6725
<input type="checkbox"/> McGrath Judicial Complex Washington County 4800 Tower Hill Road Wakefield, Rhode Island 02879-2239 (401) 782-4111	<input type="checkbox"/> Garrahy Judicial Complex Providence/Bristol County One Dorrance Plaza Providence, Rhode Island 02903-2719 (401) 458-3200

1. The Plaintiff, \_\_\_\_\_, of \_\_\_\_\_ (city or town), in the County of \_\_\_\_\_, states that the Plaintiff has been a domiciled inhabitant of Rhode Island and has resided therein for more than one (1) year next before filing this Complaint and is now a domiciled inhabitant of Rhode Island.
2. Upon information and belief, the Defendant resides in the city or town of \_\_\_\_\_ in the State of \_\_\_\_\_ and has resided in that state for \_\_\_\_\_ years next before filing this Complaint.
3. The Plaintiff states that the Plaintiff was lawfully married to the Defendant in the State of \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_.
4. The ground(s) for divorce is as follows: \_\_\_\_\_.
5. The minor children, if any, of the parties are set forth in the Statement Listing Children attached hereto as Attachment \_\_\_\_ to this Complaint.



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6. The Plaintiff has no knowledge of the pendency of other actions between the parties seeking divorce, separation, custody, or other relief, or a complaint of abuse, except for the following: \_\_\_\_\_

\_\_\_\_\_

7. WHEREFORE, the Plaintiff demands that the Family Court enter a judgment divorcing the Plaintiff from the bond of marriage, and \_\_\_\_\_

\_\_\_\_\_

I HEREBY REQUEST THAT THIS MATTER BE PLACED ON THE “NOMINAL TRACK” CALENDAR.

I HEREBY REQUEST THAT THIS MATTER BE PLACED ON THE “CONTESTED” TRACK CALENDAR.

Name of the Plaintiff _____	
Signature of the Plaintiff _____	
Address: _____	
Telephone Number: _____	Date: _____

State of \_\_\_\_\_

County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned notary public, personally appeared \_\_\_\_\_

personally known to the notary or  proved to the notary through satisfactory evidence of identification, which was \_\_\_\_\_, to be the person who signed above in my presence, and who swore or affirmed to the notary that the contents of the document are truthful to the best of his or her knowledge.

Notary Public: \_\_\_\_\_

My commission expires: \_\_\_\_\_

Notary identification number: \_\_\_\_\_



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**ATTORNEY CERTIFICATE**

/s/ _____	Rhode Island Bar Number:
Attorney for the Plaintiff	Date:
Office Telephone Number:	