



**STATE OF RHODE ISLAND JUDICIARY**

**DISTRICT COURT**

**DOMESTIC ABUSE AFFIDAVIT**

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

I, \_\_\_\_\_, on oath do depose and state as follows.

_____ _____ _____ _____ _____ _____ _____ _____
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_____ Name of the Plaintiff
_____ Signature

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: \_\_\_\_\_

