

State of Minnesota

District Court

County _____

Judicial District: _____
Court File Number: _____
Case Type: _____

Petitioner

and

**Affidavit for Filing Foreign
Protective Order**

Respondent

STATE OF MINNESOTA)
) SS
COUNTY OF _____)
(County where Affidavit signed)

I, _____, being sworn, state that I am the
person filing a foreign protective order pursuant to Minn. Stat. § 518B.01, subd 19a.

I further state my belief that the foreign protective order filed with this affidavit is a valid order
and has not been amended, rescinded or superseded by any orders from a court of competent
jurisdiction.

Dated: _____

Signature (*Sign only in front of notary public or court administrator.*)

Name: _____

Sworn/affirmed before me this
_____ day of _____, _____.

Address: _____

City/State/Zip: _____

Notary Public \ Deputy Court Administrator

Telephone: _____