

MAINE JUDICIAL BRANCH

____ Plaintiff
V.
____ Defendant
____ Other party (if any)

DISTRICT COURT
Location (Town): _____
Docket No.: _____

AFFIDAVIT OF CONFIDENTIAL ADDRESS

19-A M.R.S. § 1653(6)(D)

For the protection of the [] plaintiff [] defendant [] other party, that party makes this request to keep the following information confidential:

- [] Physical address: _____
[] Mailing address: _____
[] Email address: _____
Telephone number: [] Cell _____ [] Home _____
[] Work _____
[] Other (_____): _____

The undersigned [] plaintiff [] defendant [] other party states as follows under oath:

The health, safety or liberty of myself and/or my child(ren) would be jeopardized by disclosure of this information for the following reasons:

[] I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court.

Date (mm/dd/yyyy): _____ Signature of the [] plaintiff [] defendant [] other party

STATE OF MAINE

____ COUNTY

Personally appeared the above named, _____, and made oath that the foregoing statements are true under penalty of perjury.

Before me,

Date (mm/dd/yyyy): _____ [] Attorney at Law [] Notary Public [] Clerk

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk.
Language Services: For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.