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| **State of Minnesota**  **မံၣ်နံၣ်စိထၣ် (Minnesota) ကီၢ်စဲၣ်** |  | **District Court**  **ကီၢ်ရ့ၣ်ကွီၢ်ဘျီၣ်** | | |
| County/ကီၢ်ရ့ၣ် |  | Judicial District  တၢ်စံၣ်ညီၣ်ပီတ့လီၢ်က၀ီၤ- |  |
|  |  | Court File Number  ကွီၢ်ဘျီၣ်လံာ်တြံာ်နီၣ်ဂံၢ်- |  |
|  |  | Case Type  တၢ်ဂ့ၢ်အကလုာ်- | Domestic Abuseတၢ်မၤတရီတပါလၢဟံၣ်ပူၤဃီပူၤ |

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|  |  | Affidavit of No Ownership/Possession of Firearms or Ammunition **လံာ်ဆိၣ်လီၤသးဘၣ်ဃးဒီး တၢ်တပၢဘၣ်/တၢ်တအိၣ်ဒီး ကျိတၢ်စုက၀ဲၤတဖၣ် မ့တမ့ၢ် ကျိချံမျိာ်သၣ်တဖၣ်** |  |
| Petitioner/ပှၤပတံသကွံၢ်ကညးတၢ်, |  |  |
|  |  |  |
| vs/ဒီး |  |  |
|  |  |  |
|  |  |  |
| Respondent/ပှၤတူၢ်ကွီၢ် |  |  |

I, the Respondent in the above-entitled matter, state the following:

ယၤ, ယမ့ၢ်ပှၤတူၢ်ကွီၢ်လၢ တၢ်ဂ့ၢ်လၢတၢ်ကွဲးပာ်ဖျါအီၤလၢထး, တဲဖျါထီၣ်လၢလာ်-

I understand the court has issued or will be issuing an Order for Protection in this case and I am or will be prohibited from shipping, transporting, possessing, or receiving any firearm or ammunition for the duration of this Order.

ယနၢ်ပၢၢ်လၢကွီၢ်ဘျီၣ်ထုးထီၣ်ဟ့ၣ်လီၤ မ့တမ့ၢ် ကထုးထီၣ် ဟ့ၣ်လီၤ တၢ်ဟ့ၣ်လီၤတၢ်ကလုၢ်လၢတၢ်ဒီသဒၢအဂီၢ် လၢတၢ်ဂ့ၢ်အံၤအပူၤ ဒီး ယဘၣ် မ့တမ့ၢ် ကဘၣ်တၢ်တြီယၤလၢ တၢ်ဆှၢထီၣ်ဆှၢလီၤ, ၀ံစိာ်တီဆှၢ, ပၢဘၣ်, မ့တမ့ၢ် မၤန့ၢ် ကျိတၢ်စုက၀ဲၤ မ့တမ့ၢ် ကျိချံမျိာ်သၣ်တဖၣ် လၢ တၢ်ဟ့ၣ်လီၤတၢ်ကလုၢ်အံၤအကတီၢ်အဂီၢ်န့ၣ်လီၤ.

I do not own or possess any firearms or ammunition and will not own or possess any firearms or ammunition for the duration of this or any future Order for Protection issued in this case.

ယတပၢဘၣ် မ့တမ့ၢ် အိၣ်ဒီး ကျိတၢ်စုက၀ဲၤ မ့တမ့ၢ် ကျိချံမျိာ်သၣ်တမံၤလၢ်လၢ်လၢ တၢ်အကတီၢ်အခဲအံၤ မ့တမ့ၢ် ခါဆူညါတၢ်ထုးထီၣ်ဟ့ၣ်လီၤတၢ်ကလုၢ်လၢတၢ်ဒီသဒၢအဂီၢ်တမံၤလၢ်လၢ်လၢတၢ်ဂ့ၢ်အံၤအပူၤဘၣ်န့ၣ်လီၤ.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

ယဘိးဘၣ်ရၤလီၤတၢ်မၤကမၣ်သဲစးခီဖျိတၢ်အုၣ်သးကဘျံးကဘျၣ်လၢကီၢ်ဘျီၣ်အပူၤလၢတၢ်ကိးမံၤဒဲးလၢယတဲဖျါထီၣ်လၢလံာ်တီလံာ်မီအံၤ အပူၤန့ၣ် မ့ၢ်၀ဲတီ၀ဲဒီးဘၣ်၀ဲန့ၣ်လီၤ. Minn. သဲစးတၢ်သိၣ်တၢ်သီနီၣ်ဂံၢ်. § 358.116.

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| Dated/ဆဲးလီၤမုၢ်နံၤ |  | Signature/ဆဲးလီၤမံၤ | |
|  |  | Name/မံၤ- |  |
|  |  | Address/လီၢ်အိၣ်ဆိးထံး- |  |
| County and state where signed  ကီၢ်ရ့ၣ်ခီးထံၣ်ဒီးကီၢ်စဲၣ်တၢ်လီၢ်ဖဲဆဲးလီၤမံၤ |  | City/State/Zip  ၀့ၢ်/ကီၢ်စဲၣ်/စံး(ပ)နီၣ်ဂံၢ်- |  |
|  |  | Telephone/လီတဲစိ- |  |
|  |  | Email/အံမ့(လ)- |  |