

THIS FORM MUST BE COMPLETED IN ENGLISH
လံာ်ကိၵ်းဒိအံၤတၢ်ကဘၣ်မၤပုၤအီၤလၢအဲၤကလံးကိၵ်းလီၤ

State of Minnesota
မံၣ်န့ၣ်စိထံၣ် (Minnesota) ကိၵ်းစဲၣ်

District Court
ကိၵ်းရၢၣ်ကိၵ်းဘျီၣ်

County/ကိၵ်းရၢၣ်

Judicial District:
တၢ်စံၣ်ညီၣ်ပိတုၤလိၢ်ကဝီၤ- _____
Court File Number:
ကိၵ်းဘျီၣ်လံာ်တြၢ်နီၣ်ဂံၢ်- _____
Case Type: Domestic Abuse
တၢ်ဂ့ၢ်အကလုာ်- ဟံၣ်ပူၤဃီပူၤတၢ်စု
ဆူၣ်ခိၣ်တကး

In the Matter of /တၢ်ဂ့ၢ်-

Petitioner/ပုၤပတံၤသကိၵ်းကညးတၢ်,

**Affidavit and Motion to Modify
Order for Protection
(Minn. Stat. § 518B.01, subd. 11)**

**လံာ်ဆိၣ်လီၤသးဒီးတၢ်ဟူးတၢ်ဂဲၤလၢကဘျီၣ်ဂ့ၢ်ထီၣ်က့ၤတၢ်
တၢ်ဟ့ၣ်လီၤတၢ်ကလုာ်လၢတၢ်ဒိသဒါအဂီၢ်
(Minn. သဲစးတၢ်သိၣ်တၢ်သီနီၣ်ဂံၢ်. § 518B.01, အဒု. 11)**

vs./ဒီး

Respondent/ပုၤတူၢ်ကိၵ်း
STATE OF MINNESOTA/မံၣ်န့ၣ်စိထံၣ် (Minnesota) ကိၵ်းစဲၣ်)
) SS/SS
COUNTY OF/ကိၵ်းရၢၣ်ဒီးထံၣ် _____)

I/ယၤ, _____, state that/တဲဖျါထီၣ်လၢ-

- 1. I am the Petitioner Respondent in this action.
ယမ့ၢ် ပုၤပတံၤသကိၵ်းကညး ပုၤတူၢ်ကိၵ်းလၢတၢ်အကူၢ်အံၤအပူၤလီၤ.
- 2. A domestic abuse Order for Protection was issued on/တၢ်အ့ၣ်လိာ်ဆိးက့ၤလၢဟံၣ်ပူၤဃီပူၤ
တၢ်ဟ့ၣ်လီၤတၢ်ကလုာ်လၢတၢ်ဒိသဒါအဂီၢ်န့ၣ် ဘၣ်တၢ်ထုးထီၣ်ဟ့ၣ်လီၤအီၤဖဲ_____.

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I request that it be amended as follows /ယဃုထီၣ်လၢ တၢ်အံတၢ်ကဘၣ်မၤဂ့ၤထီၣ်အီၤ

ပိာ်ထွဲထီၣ်ဒ်လၢလၢအသိး- _____

3. Describe in detail why the Court should issue an amended Order for Protection:

ဟံၣ်ဖျါထီၣ်လီၤတၢ်လီၤဆဲး လၢဘၣ်မနုၤအယိ ကီုဒ်ဘျီၣ်ကြးထုးထီၣ်ဟ့ၣ်လီၤ

တၢ်ဟ့ၣ်တၢ်ကလုာ်လၢတၢ်ဒိသဒါအဂီၢ်လၢတၢ်ဘျီၣ်မၤဂ့ၤထီၣ်အီၤ-

4. An emergency exists because of an immediate danger of physical harm to me or my child (ren).

ဂ့ၢ်ဂီၢ်အူအိၣ်ထီၣ် မ့ၢ်လၢ တၢ်လီၤဘၣ်ယိၣ်အိၣ်လၢတၢ်ကမၤဘၣ်ဒိဆါ ယၤ မ့တမ့ၢ် ယဖိ(တဖၣ်) အနီၢ်ဒိမိၢ်ပုၢ်သတူၢ်ကလၢအယိလီၤ.

5. Because of the danger of physical harm, I am requesting that the court grant my request for a change in the Order for Protection immediately and until the date of the hearing for modification.

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မ့ၢ်လၢတၢ်လီၤဘၣ်ယိၣ်အိၣ်လၢတၢ်မၤဘၣ်ဒီဆါနီၢ်ခိမိၢ်ပုၤအယိ,
ယဃုထီၣ်လၢကီုဒ်ဘျီၣ်အုၣ်ကီၤယတၢ်ဃုထီၣ်လၢ တၢ်ကဆိတလဲတၢ်
လၢတၢ်ဟ့ၣ်လီၤတၢ်ကလုာ်လၢတၢ်ဒီသဒါအဂီၢ်တဘျီယီ ဒီးတုၤလၢတၢ်စံၣ်ညီၣ်ဒီကန့ၣ်အမုၢ်န့ၣ်
လၢတၢ်ဘျီဘၣ်မၤဂ့ၤထီၣ်အဂီၢ်န့ၣ်လီၤ.

Notice/တၢ်ဘိးဘၣ်သ့ၣ်ညါ

To the Above Named Petitioner/Respondent: Please take Notice that on
ပုၤပတံထီၣ်တၢ်ပုၤတူၢ်ကီုဒ်အမံၤလၢဘၣ်တၢ်ဟံၣ်ဖျါထီၣ်တုၤလၢထး - ဝံသးစူၤမၤနီၣ်မၤယါဃာ်တၢ်အံၤ လၢဖဲ

_____ at/ဖဲ _____ . m./န့ၣ်ရံၣ်. at/ဖဲ _____
(Date)/(မုၢ်န့ၣ်) (Time)/(တၢ်ဆါကတီၢ်) (Address)/(လီၤအိၣ်ဆိးထံး)

before/တချုး _____, I will ask the Court to change the Order for
(Judge)/(စံၣ်ညီၣ်ကီုဒ်)

Protection as requested in my affidavit above/ယဃုထီၣ်ကီုဒ်ဘျီၣ် လၢကဆိတလဲ
တၢ်ဟ့ၣ်လီၤတၢ်ကလုာ်လၢတၢ်ဒီသဒါအဂီၢ် ဒ်တၢ်ဃုထီၣ်အီၤလၢ
ယလံာ်ဆိၣ်လီၤသးလၢထးအပူၤအသိးန့ၣ်လီၤ.

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

ယဘိးဘၣ်ရၤလီၤတၢ်မၤကမၣ်သဲစးဒီဖျါတၢ်အုၣ်သးကဘျးကဘျီၣ်လၢကီုဒ်အပူၤလၢတၢ်ကိးမံၤဒဲးလၢယ
တဲဖျါထီၣ်လၢလံာ်တီလံာ်မိအံၤ အပူၤန့ၣ် မ့ၢ်ဝဲတီဝဲဒီးဘၣ်ဝဲန့ၣ်လီၤ. Minn. Stat. § 358.116.

Dated/ဆဲးလီၤမုၢ်န့ၣ်-- _____

Signature/ဆဲးလီၤမံၤ _____

Name/မံၤ- _____

If you have asked to keep your address and/or phone number confidential, do not include it here.

နမ့ၢ်ဃုထီၣ်လၢတၢ်ကဟံၣ်နလီၤအိၣ်ဆိးထံး ဒီး/မ့တမ့ၢ်
လီၤတဲစီနီၣ်ဂံၢ်လၢတၢ်ခူသ့ၣ်န့ၣ်, တဘၣ်ထၢန့ၣ်ဃုထီၣ်အံၤ

Address/လီၤအိၣ်ဆိးထံး- _____

City/State/Zip- _____

ဝုၢ်/ကီုဒ်စံၣ်/စံး(ပ)နီၣ်ဂံၢ်-

Telephone/လီၤတဲစီ- () _____

E-mail address/အံၤမ့(လ)- _____

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Distribution/တၢ်ရၢလီၤ

_____ Certified copy or original - Return to Court Administrator with Affidavit of Personal Service attached

တၢ်အကွဲးဒီး မ့တမ့ၢ် တၢ်နီၤနီၢ်လၢအိၣ်ဒီးတၢ်အုၣ်သးဆဲးလီၤမံၤ -

ဆၢကဒါက့ၤဆူကိာ်ဘျီၣ်ပုၤပၤဆၢရဲၣ်ကျဲၤတၢ် ဃုာ်ဒီး လံာ်ဆိၣ်လီၤသးဘၣ်ဃးဒီး

တၢ်မၤစၢၤလၢနီၢ်တဂၤစုာ်စုာ်အဂီၢ်လၢတၢ်ဘျးစဲဃုာ်အီၤန့ၣ်တက့ၢ်.

_____ Copy for Petitioner(s)

ပုၤပတံသကိာ်ကညးတၢ်(တဖၣ်)အကွဲးဒီး

_____ Copy for Respondent(s)

ပုၤတူၢ်ကိာ်(တဖၣ်)အကွဲးဒီး

_____ Copy for file until original returned

တၢ်ကွဲးဒီးလံာ်တြီၣ် တုၤလၢတၢ်ဆၢကဒါက့ၤတၢ်နီၤနီၢ်

_____ Copy for local police department

တၢ်ကွဲးဒီးလၢလီၢ်ကဝီၤပၤကီၢ်ဝဲၤကျိၤအဂီၢ်

_____ Copy for Sheriff

တၢ်ကွဲးဒီးလၢပၤကီၢ်ခိၣ်အဂီၢ်

_____ Other: _____

အဂၤ-

_____ Dissolution File

တၢ်မၤဟးဂီၤလံာ်တြီၣ်