FORM 010

Police File # (if known):
Court Location:

PROVINCIAL COURT OF NEWFOUNDLAND AND LABRADOR

BETWEEN _____ ***Applicant*** _____
D.O.B. (YYYY/MM/DD)

AND _____ ***Respondent*** _____
D.O.B. (YYYY/MM/DD)

REPLY

(Section 23 of the Provincial Court Family Violence Protection Rules)

I contest the following claims made in the application:

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I make this statement conscientiously and in good faith. I understand that it is an offence to knowingly make a false statement under oath.

SWORN/AFFIRMED before me
at _____ in the
Province of Newfoundland and Labrador
this ____ day of _____ 20___.

_____
Signature of Applicant/Respondent

_____
A Person authorized to Administer Oaths

Note: **Please forward a copy to the other party and to the Court at least two days before the hearing.**