

PETITIONER-IN-RECONVENTION

ADV.

DEFENDANT-IN-RECONVENTION

Parent/Guardian name if defendant-in-reconvention is a minor

COURT

PARISH/CITY OF

STATE OF LOUISIANA

DIVISION: NUMBER:

FILED: CLERK:

CONFIDENTIAL ADDRESS FORM
TO BE USED WHEN PETITIONER-IN-RECONVENTION DOES NOT WANT
DEFENDANT-IN-RECONVENTION TO LEARN ADDRESS

PETITION FOR PROTECTION FROM ABUSE

The petition of _____, born _____, a resident of the

your name

month, day, year

State of _____, respectfully represents:

Paragraph 1

Petitioner-in-reconvention files this petition on behalf of:

- a.

Petitioner-in-reconvention, and/or
- b.

Minor child(ren) as follows: (Name, Date of Birth, Relationship to Petitioner-in-reconvention)
- c.

Alleged incompetent: (Name, Date of Birth, Relationship to Petitioner-in-reconvention)

Paragraph 2

Petitioner-in-reconvention's current address:

No. & Street

Apt. No.

City

State

Zip Code

The minor child(ren)'s or alleged incompetent's current address:

No. & Street

Apt. No.

City

State

Zip Code

THIS COVER SHEET IS TO BE FILED UNDER SEAL AND ITS CONTENTS TO REMAIN CONFIDENTIAL TO THE COURT PURSUANT TO LA. R.S. 46:1844, R.S. 46:2134(B), R.S. 13:4248(A), or Ch. C. Article. 1568(B).