

**FIREARM DISCLOSURE  
NOTICE**

JD-FM-189 Rev. 10-13  
C.G.S. § 46b-38c

STATE OF CONNECTICUT  
**SUPERIOR COURT**

[www.jud.ct.gov](http://www.jud.ct.gov)

**Instructions**

1. *Original to the Court.*
2. *Copy to State's Attorney's Office.*
3. *Copy for CSSD/Family Services file.*

Type of action <input type="checkbox"/> <b>Family violence</b> <input type="checkbox"/> <b>Restraining Order</b> <input type="checkbox"/> <b>Updated information</b>	Docket number
Name of Respondent/Defendant <i>(Last, First, Middle)</i>	Date of birth
Name of Complainant/Victim <i>(Last, First, Middle)</i>	Date of birth

☐ **The above-named Respondent/Defendant holds a permit to carry a pistol or revolver.**

☐ **The above-named Respondent/Defendant possesses one or more firearms.**

☐ **The above-named Respondent/Defendant possesses ammunition.**

The above information was disclosed by <input type="checkbox"/> Complaint/Victim <input type="checkbox"/> Respondent/Defendant	Copies of this notice to <input type="checkbox"/> Judge <input type="checkbox"/> State's Attorney <input type="checkbox"/> C.S.S.D. Family File
Name and location of counselor	Date prepared
Signed <i>(Counselor)</i>	Date signed