



Gun Lake Tribal Court

Chief Judge: Michael Petoskey

2873 Mno Bmadzewen Dr.
Shelbyville, MI 49344

Phone: (269) 397-1630
Fax: (269) 397-1631

CASE NUMBER:

Petitioner:

Respondent:

v.

Petitioner's Attorney:

CIVIL COMPLAINT

Petitioner, _____ states in this *Complaint* the following cause of action against Respondent, _____.

I. IDENTITY OF THE PARTIES

1. I am the Petitioner.
2. I reside in _____ County, State of _____.
3. Respondent resides in _____ County, State of _____ and may be served with process by serving:
 - a. Name of Respondent or registered agent for service: _____
 - _____
 - b. Address: _____
4. Date(s) the claim arose on: _____
5. Location where the claim arose: _____
6. Tribal Court has jurisdiction because: _____
- _____
- _____
- _____

II. INFORMATION ON PRIOR OR CONCURRENT FILING *(Please check all that apply).*

1. Family Cases

There is no other pending or resolved action within **any** jurisdiction of a family division of circuit court involving the family or family members of the parties.

An action within the jurisdiction of **any** court or family division of circuit court involving the family or family members has been previously filed in _____ Court.

Is the action still pending? No Yes.

If Yes, the docket number and judge assigned to the action are:

Case Number:	Judge:
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2. General Civil Cases

There is no other pending or resolved civil action arising out of the same transaction or occurrence as alleged in this Complaint.

A civil action between these parties or other parties arising out of the transaction or occurrence as alleged in the Complaint has been previously filed in _____ Court.

Is the action still pending? No Yes.

If Yes, the docket number and judge assigned to the action are:

Case Number:	Judge:
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III. CAUSE OF ACTION

Please provide the Court with a complete description of the allegations which you believe give rise to a legal claim that entitles you to a remedy from this Court. Please cite applicable Tribal law and attach any materials that may support your allegations.

(Additional sheets of paper may be used if necessary. However, please indicate here that you have done so.) Additional sheets attached.
