



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:	v	Respondent:
Petitioner's Attorney:		

PETITION/AFFIDAVIT OF PETITIONER

TO THE TRIBAL COURT:

I, _____ depose and state:

1. I am the Petitioner or attorney of Petitioner in the above-referenced matter.
2. My name and address listed in the caption above is correct.
3. The name of the Respondent is _____
4. The last known address of the Respondent is _____
5. A foreign judgment was entered against the Respondent and is attached to the *Certification of Records of Michigan Court* which accompanies the filing of this *Petition/Affidavit*.
6. The foreign judgment attached to the *Certification of Records of Michigan Court* is final and no appeal that involves the judgment is pending.
7. No subsequent orders vacating, modifying, or reversing the foreign judgment have been entered in the jurisdiction that rendered the judgment.
8. To the best of my information, knowledge, and belief, the Respondent is subject to the jurisdiction of the Tribal Court with regard to recognition of the foreign judgment because of the following:

- a. The Respondent works for the Gun Lake Tribe;
 - b. The Respondent works for the Gun Lake Casino which is a subordinate entity of the Gun Lake Tribe;
 - c. The Respondent resides on Tribal trust land; and/or
 - d. Please see the attached *Affidavit* for an explanation.
9. The court from which the foreign judgment was issued provides reciprocal recognition and enforcement to the orders, judgments, decrees, subpoenas, and warrants of this Tribe.

Date

Signature of Petitioner (or)
Attorney for Petitioner

Please Print Name

ACKNOWLEDGMENT

THE STATE OF _____)
) ss.
COUNTY OF _____)

I, _____ in said County and State, personally appeared before on this date and subscribed and sworn to me the forgoing *Petition/Affidavit of Petitioner*, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office, this _____ day of _____, 20_____.

Signature: _____

Printed Name: _____

County of: _____

State of: _____

Commission Expiration: _____