IN THE SAC & FOX TRIBE OF THE MISSISSIPPI IN IOWA TRIBAL COURT

Meskwaki Settlement 307 Meskwaki Road Tama, Iowa 52339-9629

		Court Case No.
vs.	Petitioner	FORM – Pro Se (Self Represented)
v 5.		
	Respondent	(Describe intent: "Motion to" "Request for" "Notice of")
PRINT	ALL INFORMATION LEGIBLY	7. Attach additional pages as necessary.
If "this • • Atta	Yes", do NOT include any constrom (such as phone, address, If "Yes", Name of the Protecte If "Yes", (select one) Name of Court of issuance:ach the "Order of Protection" to	itact information concerning the PROTECTED PERSON in email, employer or work location, etc.). ed Party/ies: nament
1.	Ι,	, am the PETITIONER in this case. RESPONDENT OTHER
2.		reside is:
	My residence is	on the Meskwaki Settlement. not on the Meskwaki Settlement.
3.	Briefly state what you would	like the Court to consider (add extra pages as needed):

_	
r	Write the reasons why the Court should grant your request and include Court rules, record, laws, and cases, if any, that support your reasons. Also <u>list any documents that are attaching (A, B, C, or 1, 2, 3, etc)</u> :
_	
_	
	Attach additional pages as needed; Also, list and identify with letters "A", B", C", etc., any additional separate attachments you are submitting, then designate the same letter on first page of the attachment

		·
nd any attachments) on the	he other party, in t	I am responsible for serving this document the manner required by the Court's Rules of
ocedures, and I am respon	nsible for providin	g proof of that service to the Clerk of Court.
		ertify here (your initials) that ng to all parties in this case or their lawyers
they have one, as listed be		ing to an parties in this case of their lawyers
Delivered on Date:		Delivered on Date:
To Person A)		To Person B)
At Mailing Address/emai	d:	At Mailing Address/email
Delivered on Date:		Delivered on Date:
To Person C)		To Person D)
·	il	At Mailing Address/email
At Mailing Address/emai		

STOP

	\sim								
Ī	WAIT!	(Wait to sign	and date	the line	below	until you	ı are bef	ore a i	notary)
						•			

Date	Signature of Filing Party
	Printed Name:
	! STOP - Do not include the information below if there is an active order of protection and if the Filer is the protected party.
	Mailing Address:
	City, State, Zip:
	Telephone: