| National Jural Society Complaint Form  |  |
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| Greetings,   |  |
| This is an Official NJS Complaint Form.  |  |
| If you have a complaint against a jurist, DO NOT USE THIS FORM. Go to the ARNA HQ Website Link Below: <u>Jurist Complaint Form</u> |  |
| For all other complaints, use this form.   |  |
| Plaintiff Information  |  |
| The Plaintiff (you) is the person filing the complaint.  |  |
|  |  |
| Full Legal Name of Plaintiff(s) *  |  |
| Keishia Henning  |  |
|  |  |
| Is the Plaintiff(s) an ARNA National? *  |  |
| ○ Yes  |  |
| No   |  |
| Other:   |  |
|  |  |
|  |  |

| Plaintiff(s) Email *  |
|---|
|   |
| Plaintiff(s) Birthday *   |
|   |
|   |
| Plaintiff(s) Phone Number *                                     |
|   |
| Is this a Counterclaim, Crossclaim, or Third Party Complaint? * |
| Ounterclaim Counterclaim  |
| Crossclaim  |
| Third Party Complaint   |
| No  |
|   |

| Are you open to Arbitration with the Defendant(s) to seek a resolution to this matter? *  |  |  |
|---|--|--|
| ○ Yes   |  |  |
| No  |  |  |
| Other:  |  |  |
|   |  |  |
|   |  |  |
| Would you like a Jurist to assist you as Counsel? *  NOTE: In cases of Prosecution, the Chief Executive or other delegated Prosecutor will have to represent the Plaintiff(s) |  |  |
|   |  |  |
| Yes - I understand that I will have to compensate the jurist(s) representing me.  |  |  |
| No - I am representing myself in this case. [We will asked this again to confirm.]  |  |  |
| Other:  |  |  |
|   |  |  |
| Have you paid the #EO Complaint Filing Foo? *   |  |  |
| Have you paid the \$50 Complaint Filing Fee? *  |  |  |
| Yes   |  |  |
| No - I have submitted an Application to Waive the Filing Fee  |  |  |
| Other:  |  |  |
|   |  |  |
| Defendant Information   |  |  |
| The Defendant is the person you are filing the complaint against.   |  |  |

| Full Legal Name of Defendant(s) *  Ki'n Way XI   |
|--|
|  |
| Is the Defendant(s) an ARNA National? *  |
| ○ Yes  |
| ○ No   |
| Other: Most wanted   |
|  |
| Is the Defendant(s) an Aboriginal Jurist, Doctor, or ARNA Government Official? *  We have specific laws in ARNA that pertain to these groups of people.  Jurist  Doctor  Government Official  Other: |
| Defendant(s) Email *   |

| Defendant(s) Birthday *  |
|--|
| Defendant(s) Phone Number *  |
| Your Cause(s) of Action  |
| Your cause of action is your reason for filing this complaint.  Complaints brought before this Court must be based on breaches of:  (a) the ARNA Constitution and all Laws in pursuance thereof, with breaches of the 42 Moral Codes of Conduct being considered criminal;  (b) ARNA protocols;  (c) specific indigenous common laws as adopted by ARNA; and/or  (d) contracts.  In this section, you will state what the Defendant(s) did to breach/injure you. |
| List the types of breaches that apply to your case. *  State the specific laws and moral codes (if known) that were broken by the Defendant(s) actions. If the Defendant(s) breached a contract you had with them, state the type of contract.  A,B, D   |
| When Did The Violation(s) Occur? *  If the breaches have been ongoing for a period of time, give the date or time frame when they first began. If the violations occurred on multiple specific dates, list those dates.  8/2023- 4/2024  |

Give a brief but comprehensive description of each of your Causes of Action. \* Here you will fully explain how the Defendant(s) violated you pertaining to each law or contract that was breached as stated above. Worked on our case while not being a licensed Jurist, embezzled funds, broke contracts Please upload all Relevant Evidence that you currently have here. You may send additional files to the email: xiamarujuralsociety@gmail.com MG\_3444 - Keis... MG\_5208 - Keis... Scanned Docum... image0 - Keishia ... Nu way... IMG\_2644 - Keis... IMG\_2643 - Keis... IMG\_2645 - Keis... IMG\_5207 - Keis... **Demand for Remedy** Here you will state what you want the Court to grant you as relief. State what damages you seek to gain from the Defendant(s), and/or what punitive actions you seek for the Defendant(s). \* This may be a demand for an apology, monetary payment, punishment, return of property, etc. \$4680 minus the tribal business cost **Complaint Verification Statement** Here you will attest to the truth and accuracy of your complaint to the best of your knowledge.

| By submitting this form, you certify that:   |  |
|--|--|
| You are an ARNA National or IPA Member, or in contract with an ARNA National or IPA Member.              |  |
| You are of the age of maturity to file this complaint.   |  |
| You are mentally competent to file this complaint.   |  |
| You have personal knowledge of the facts herein this complaint.  |  |
| "I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge." |  |
| I agree  |  |
|  |  |

Plaintiff Signature \*

Type your lawful-legal name below which stands as your electronic signature.

Keishia Henning

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