

NORTHERN CALIFORNIA INTERTRIBAL COURT SYSTEM

Northern California Intertribal Court System

Administrative Offices

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Cahto Tribe of Laytonville

Hopland Band of Pomo Indians

Coyote Valley Band of Pomo Indians

(For Court Use Only)



COVER SHEET FOR FILING DOCUMENT OR REPORT TO THE COURT

In the following case before this Court:

_____ vs. _____
Plaintiff/Petitioner Defendant/Respondent

(Case Number)

I, _____, am the Petitioner/Plaintiff or the Respondent/Defendant Other
(Complete Name)

(such as a witness, agency or Social Services) _____ in this case. I am filing the attach document for the following: Information to the Court or to comply with the Court's orders:

1. The attached document(s) is/are (describe each document that you are attaching):

2. The Court ordered that I file the document(s) and I am complying with the Order.

3. I am filing this document to ask that the Court to the following:

Additional pages and/or documents are attached (.pdf format or hardcopy only)

4. I understand that anything I file with the Court must be served or given to the other parties in this case and I am asking the Court Clerk to serve the attached document(s) to the other parties on my behalf (there may be a fee for service depending on the type of case). If you have someone else (the person must be an adult and not involved in this the case) serve the document, have that person complete the Declaration of Service (the last form in this packet) and submit it with this form.

Please check if a fee waiver has been filed by you in this case.

5. I am requesting that the Court Clerk serve the attached document(s) for the posted fee.

I declare, under penalty of perjury, that I have personal knowledge of the facts in the statement above or based on the information I have, I believe the facts are true.

(Printed name)

(Signature)

_____, 20_____
(Date)

(Court Stamp)

DECLARATION OF SERVICE

I swear or affirm by my signature below, under penalty of perjury, that I am not a party to this case and that on _____, 20_____, a copy of THE ATTACHED _____ was served according to the Rules of Court to:

Opposing Party: *(Fill in name)* _____ mailed served electronically or hand delivered to the following address or email address: _____

Opposing Attorney: *(Fill in Name)* _____ mailed served electronically or hand delivered to the following address or email address: _____

Additional: _____ mailed served electronically or hand delivered to the following address or email address: _____

Printed Name: _____ My Age: _____ years¹

_____, 20_____
Dated

Signature of Person Completing Service²

¹ Service must be completed by a person over the age of 18 years.
² The Declaration of Service does not require a notarized signature.