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| **TRIBAL COURT OF THE CONFEDERATED TRIBES OF SILETZ INDIANS OF OREGON**NEW grayscale logo copy | Instruction for filing a PETITION TO OBTAIN A judgment in TRIBAL COURTSiletz Tribal Court Rules and Procedures §3.023 |

**Court Address Court telephone no.**

**P.O.Box 549, Siletz, OR 97380 (800) 922-1399**

**201 SE Swan Ave. Siletz, OR 97380 (541) 444-8228**

 **(541) 444-8270 Fax**

**IMPORTANT!**

Fill out the Information sheet, Petition Form and file completed petition with filing fee in Tribal Court.

# Instruction for filing a Petition for Judgment

PETITION FOR JUDGMENT

## The person/agency filing is the Petitioner. The person/agency being filed against is the Respondent.

To obtain a Judgment from Siletz Tribal Court, **You must file a Petition for Judgment, pay the filing fee and have the Respondent served with the documents. For complete instructions, refer to the Siletz Tribal Court Rules and Procedures. The Siletz Tribal Court Rules and Procedure Ordinance can be found at** [**www.ctsi.nsn.us**](http://www.ctsi.nsn.us)**.**

 **\***Note: Tribal Court will assign a case number when you file the Petition.

If you have any questions, please contact Tribal Court at (541) 444-8228 or 1-800-922-1399 ext. 1228.

To file a Petition for Judgment:

Mail: Siletz Tribal Court, P.O. Box 549, Siletz, OR 97380

Fax: (541) 444-8270

Physical address: 201 SE Swan Ave., Siletz, Oregon

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| **TRIBAL COURT OF THE CONFEDERATED TRIBES OF SILETZ INDIANS OF OREGON**NEW grayscale logo copy | **COURT INFORMATION SHEET** |

**Court Address Court telephone no.**

**P.O.Box 549, Siletz, OR 97380 (800) 922-1399**

**201 SE Swan Ave. Siletz, OR 97380 (541) 444-8228**

 **(541) 444-8270 Fax**

Name: Click or tap here to enter text.

Last Middle Initial First

Telephone Number: Click or tap here to enter text.

Address: Click or tap here to enter text.

Mailing Address (if different than above): Click or tap here to enter text.

Please check all statements that apply to you:

[ ]  I would like to file a Petition for Judgment (see Siletz Tribal Court Rules and Procedure Ordinance)

[ ]  I would like to file a Petition on behalf of Petitioner.

What is the name & address of the person/agency against whom your Petition is being filed?

Click or tap here to enter text.

[ ]  I am a member of the Confederated Tribes of Siletz Indians of Oregon.

[ ]  I am not a member of the Confederated Tribes of Siletz Indians of Oregon, and hereby voluntarily submit to the jurisdiction of the Siletz Tribal Court

[ ]  I am admitted to the Siletz Tribal Bar. (Yes or No)

[ ]  I am/have paid the filing fee.

I declare that the above statements are true and made in good faith.

Click or tap here to enter text. Date: Click or tap here to enter text.

Applicant

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| **TRIBAL COURT OF THE CONFEDERATED TRIBES OF SILETZ INDIANS OF OREGON**NEW grayscale logo copy | **PETITION FOR JUDGMENT** | **CASE NO.** |

**Court Address Court telephone no.**

**P.O.Box 549, Siletz, OR 97380 (800) 922-1399**

**201 SE Swan Ave. Siletz, OR 97380 (541) 444-8228**

 **(541) 444-8270 Fax**

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| Petitioner name, address, and telephone no.Click or tap here to enter text. |  V. | Respondent name, address, and telephone no.Click or tap here to enter text. |

I, Click or tap here to enter text., hereby petition the Tribal Court and request a hearing to: Click or tap here to enter text.

Click or tap here to enter text.

Signature of Petitioner

Click or tap here to enter text.

Date