



**LEECH LAKE BAND OF OJIBWE
TRIBAL COURT**

190 Sailstar Dr. NW
Cass Lake, MN 56633
(218) 335-3682/3586

Civil Division

<hr/> <p style="text-align: center;">Plaintiff,</p> <p style="text-align: center;">vs.</p> <hr/> <p style="text-align: center;">Defendant.</p>		<p style="text-align: center;">CIVIL PETITION</p> <p style="text-align: center;">Court File No. _____</p>
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1. I am the plaintiff in this matter and swear that all information contained in this petition is true and correct to the best of my information and belief.
2. My full legal name is: _____
First Middle Last
3. My street address is: _____
4. My mailing address is: _____
5. Date of Birth: _____ Tribal Affiliation: _____
6. I am bringing this petition against: _____
First Middle Last
7. The street address of the defendant is: _____

8. The mailing address of the defendant is: _____

Notice: If you are filing this petition against the Leech Lake Band, you must first obtain a waiver of sovereign immunity from the RTC. Failure to obtain a waiver will result in dismissal.

9. The reason that I am filing this petition against the defendant is as follows: (State in simple language the basis for your petition. If more space is needed use the back of this page.) _____

10. This petition concerns certain real property (land) and the correct legal description of this land is as follows: _____

(If this petition does not involve real property, draw an X through paragraph 10.)

11. This petition concerns minor children whose names and dates of birth are as follows: _____

(If this petition does not involve minor children, draw an x through paragraph 11.)

12. I request the Court grant me such relief as I may be entitled to and specifically the following: (Check those that apply and be specific as to what you are asking the Court to do.)

A judgment in the amount of _____ dollars.

An order prohibiting the defendant from: _____

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An order requiring the defendant to: _____

An order awarding me the following: _____

(Date)

(Signature of Plaintiff)

(Sign Only in presence of Notary Public or Court Officer)

Street Address: _____

City, State, Zip: _____

Telephone: () _____

Subscribed and sworn to before me, a Notary Public/Officer of the Court, this _____
day of _____, 20____.

Notary Public/Court Officer