

SAGINAW CHIPPEWA TRIBAL COURT 6954 EAST BROADWAY MT. PLEASANT, MI 48858 TELEPHONE: (989) 775-4800	CIVIL COMPLAINT	CASE #: HONORABLE PATRICK M. SHANNON
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PLAINTIFF: (List full name, address, and telephone number)	DEFENDANT: (List full name, address, and telephone number)
PLAINTIFF'S ATTORNEY: (List full name, address, and telephone number)	DEFENDANT'S ATTORNEY: (List full name, address, and telephone number)

PLAINTIFF STATES THE FOLLOWING FOR (HIS/HER/THEIR) COMPLAINT:

(You must state your complaint below. Number each statement chronologically. Start from the beginning and explain what happened. Use additional sheets of paper if necessary. Attach any necessary documentation and label as Exhibit A, B, C, etc.)

- 1.
- 2.
- 3.
- 4.
- 5.

(I/WE) REQUEST THAT THE COURT ORDER THE FOLOWING RELIEF:

(You must explain what you would like the Court to order the Defendant to do.)

- 1.
- 2.

The undersigned certifies that the information contained in this complaint is true, to the best of my Knowledge.

_____ Date

_____ Signature of Plaintiff