

**IN THE WILTON RANCHERIA COURTS
WILTON RANCHERIA**

PETITION	
Your Contact Information Name: *Email: Address: Phone: Attorney (if applicable):	[COURT USE ONLY] CASE NO: CASE NAME: Party 1/Petitioner: Party 2/Respondent:
PLEASE PRINT CLEARLY USING BLUE OR BLACK INK AND COMPLETE EACH SECTION TO THE BEST OF YOUR ABILITY. BE SURE TO SIGN THIS FORM.	

* I confirm that I provided a valid email address. I agree to check my email regularly. I understand that the Court and the other party will use the email address for electronic service of documents and for correspondence regarding my case.

COMES NOW, _____, Party 1, to allege and request the following:
Your Name

1. Case Type: Small claims Judgment enforcement Contract dispute
 Other: _____

Your Contact Information (Party 1)

2. a) Your Name: _____
Birth Date: _____

- There are multiple filing parties. (If so, attach Additional Parties Form.)
 My address is confidential. I may be served at the Court Clerk's office.
- b) I am an:
 Enrolled member of the Wilton Rancheria.
 Eligible for membership in the Wilton Rancheria.
 Enrolled member of the _____, a federally recognized Tribe.
 Eligible for membership in the _____, a federally recognized Tribe.
 Not a member or not eligible for membership in a federally recognized tribe.

- An Indian tribe or tribal entity. Please list: _____
- Other _____

Party 2 Information (Who you have a dispute with)

3. There is only one other party in this case.
 There are multiple other parties. (If so, attach Additional Parties Form.)
 Other: _____

4. a) Party 2's Name: _____
Birth Date: _____
Address: _____
Email: _____
Phone: _____

Party's address is unknown to me. (If I do not know the other party's address, I understand that I am responsible for searching for their address so they can be served with copies of the petition and summons.)

- b) Party 2 is an:
- Enrolled member of the Wilton Rancheria.
 - Eligible for membership in the Wilton Rancheria.
 - Enrolled member of the _____, a federally recognized Tribe.
 - Eligible for membership in the _____, a federally recognized Tribe.
 - Not a member or not eligible for membership in a federally recognized tribe.
 - An Indian tribe or tribal entity. Please list: _____
 - Tribal enrollment status is unknown to me.
 - Other _____.

5. Clearly and briefly state the events that occurred and/or facts supporting your claim. (*Please include dates and locations these events occurred*).

6. I have additional documents to support my claim. I have attached the following documents: _____

Relief Requested

7. I want the Tribal Court to:

- Order the other party to pay the debt and monies owed to me.
- Declare and enforce my legal right(s) to: _____
- Enforce the judgment I received against the other party.
- Find the other party at fault for my personal injury.
- Find the other party at fault for my real or personal property damage.
- Order the other party to: _____

 Order the following: _____

 Additional pages are attached.

8. Temporary Order (skip if you do not want a temporary order)

- I am requesting a temporary emergency order.
- I am asking the Court to issue a temporary emergency order for the following pending the first hearing: _____

 I will suffer immediate and irreparable harm if the Court does not issue a temporary emergency order pending the first hearing. The harm I will suffer is:

Filing Fee

9. Please check the applicable box:

- Filing Fee Attached
- Request to Waive Court Fees (Form 2-003) Attached
- Filing Fee Automatically Waived for Wilton Rancheria or Entity of Wilton Rancheria

Certification

I certify that I understand I am responsible for finding a person at least 18 years old and not a party to this case who can deliver copies of this Petition and the Summons prepared by the Court Clerk to the other party. I can ask a friend or family member, or I can use a process server at my own expense and effort.

I certify, under penalty of perjury under the laws of the Wilton Rancheria and the State of California, that the foregoing Petition and all attachments are true and correct to the best of my knowledge and belief.

Date: _____ Signature: _____

Printed Name: _____

Additional Filing Parties: Attach additional signature pages if there are more filing parties.

Date: _____ Signature: _____

Printed Name: _____