

1 Your Name \_\_\_\_\_  
2 Street Address \_\_\_\_\_  
3 City, State, Zip \_\_\_\_\_  
4 Phone Number (with area code) \_\_\_\_\_  
5 Email \_\_\_\_\_

6  
7 **MORONGO BAND OF MISSION INDIANS**  
8 **TRIBAL COURT**  
9

10  
11 NAME OF PLAINTIFF(S)

) Case No.:

) **DOCUMENT TITLE:**

)

)

14 v.

)

15 NAME OF DEFENDANT(S),

)

)

)

)

18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

---

---

---

---

---

---

---

---

---

---

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

I declare under the penalty of perjury under the laws of the State of California and the Morongo Band of Missions Indians that the forgoing is true and correct.

DATED: \_\_\_\_\_

PRINT YOUR NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_