



SHINGLE SPRINGS BAND OF MIWOK INDIANS TRIBAL COURT

P.O. Box 1340, Shingle Springs, CA 95682

Telephone: (530) 698 – 1446

Website: <https://www.shinglespringsrancheria.com/tribal-court/>

INFORMATION OF PERSON FILING FORM:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: (     ) \_\_\_\_\_

(Check which apply) I am:

- Petitioner
- Respondent
- Other: \_\_\_\_\_
- Attorney/Advocate for: \_\_\_\_\_

\_\_\_\_\_

CASE NO.: \_\_\_\_\_

**MOTION**  
[FOR COURT USE ONLY]

Petitioner: \_\_\_\_\_ Respondent: \_\_\_\_\_

or

(If Guardianship or Conservatorship or Domestic Partnership:) In re: \_\_\_\_\_

1. I, (name) \_\_\_\_\_ bring this Motion to

request that the Tribal Court do the following:

*(Describe what you need the Court to do. Examples: To compel another party to produce evidence OR To request a hearing where you wish to present new evidence or a new legal argument OR To request that the Judge close the case because you and the other party settled the matter on your own. NOTE: It will be up to the Judge whether to grant or deny your Motion.)*

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CASE NAME:	CASE NO:
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Check here if additional pages are attached.

I declare under penalty of perjury under the laws of the Shingle Springs Band of Miwok Indians that the foregoing is true and correct.

\_\_\_\_\_ Date: \_\_\_\_\_  
 Person Bringing Motion [*PRINTED OR TYPED*]

\_\_\_\_\_  
 Signature