



FORT MOJAVE TRIBAL COURT
 Fort Mojave Indian Tribe of Arizona, California & Nevada Reservation
 Physical & Mailing Address:
 8492 South Highway 95, Mohave Valley, Arizona 86440
 Telephone: (928) 346-5200 Fax: (928) 346-5287

COURT USE ONLY

PETITIONER: _____
 Address: _____
 City, State, Zip: _____
 Phone: Home: _____ Work: _____ Mobile: _____
 v.

Case Number

RESPONDENT: _____
 Address: _____
 City/State/Zip: _____
 Phone: Home: _____ Work: _____ Mobile: _____

Division: **CIVIL**

RESPONSE TO PETITION FOR DISSOLUTION OF MARRIAGE

The relief requested in the Petition should should not be granted for the following reasons:

- The marriage is not irretrievably broken.
- The information in the Petition is incorrect. The following information is the correct information:

I ask that the Court enter orders regarding the status of the marriage; best interests of the child(ren); maintenance (spousal support); child support; division of property and debts; attorney fees and costs, if appropriate; restoration of the previous name of a party; and any other necessary orders as follows:

The Respondent requests that the Court restore his or her name to: _____

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

SIGNATURE(S) ARE REQUIRED BELOW BEFORE FILING WITH THE COURT

VERIFICATION

I declare under penalty of perjury under the law that the foregoing is true and correct.

Executed on this _____ day of _____, _____
Month Year

Printed Name of Respondent

Signature of Respondent

Attorney Signature (If Applicable)

SIGNATURE IS REQUIRED BELOW BEFORE FILING WITH THE COURT

CERTIFICATE OF SERVICE

I certify that on _____ (date) a true and accurate copy of this Response was served on the other party by:

Hand Delivery or

By placing it in the United States mail, postage pre-paid, and addressed to the following:

Date

Signature