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

PETITIONER:			
City, State, Zip:			COURT USE
Phone: Home:	Work:	Mobile:	ONLY
V.			
RESPONDENT:			Case Number
Address:			
City/State/Zip:			Division: CIVIL
Phone: Home:	Work:	Mobile:	
Petitioner's Full Name: Address:			
			Zip:
Telephone:	-	E-Mail Address:	· · · · · · · · · · · · · · · · · · ·
Respondent's Full Name			
Address:			
City:		State:	Zip:

Telephone: _____ E-Mail Address: _____

	(Your Name)	(Name of City/Town)			
S	WEAR I AFFIRM AND SAY THAT:				
1.	I am the Petitioner(s). I have personal knowledge of the facts set out below, except where I say that they are based on information from another person. In that case, I believe the facts to be true.				
2.	I know the Respondent(s) because:				
3.	relevant facts; including the dates; the nature a	s: Order against the other party or parties, stating all and history of the conduct; threats; and whether or not u need more room, use a blank sheet of paper.			

l, ______, of _____

4. My reason for asking for a Restraining Order without notice to the Respondent(s) is: (State all relevant facts. If you need more room, use a blank sheet of paper)		
D	ate:	
	Signature of Petitioner	
S	UBSCRIBED AND SWORN before me on this day of	
N	otary Public	
R	esiding at	
С	ommission Expires	