LITTLE RIVER BAND

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:Α	SE	NO.	and	JU	DGE

OF OTTAWA INDIANS TRIBAL COURT						
Court address			Cou	urt telephone no.		
Plaintiff(s)/Petitioner(s)		Defendant(s)/Responde	ent(s)			
In the matter of						
TO: Clerk of the court/Register, a	ıll attorneys of record, and	unrepresented parties:	Specify names and addresses.			
I appear on behalf of				as		
☐ Appointed ☐ Retained b	ру					
I certify that I represent no other	interest whatsoever of any	party to this cause, ex	cept as follows:			
Date		Signature				
Name (type or print)	Bar no.	Address				
Firm name		City, state, zip		Telephone no.		
Approved, SCAO Form MC 02, Rev. 12/21	Dist Cou	ribute form to: rt				