

Little River Band of Ottawa Indians Tribal Court	COMPLAINT FOR DIVORCE	CASE NO.
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Court Address
3031 Domres Road, Manistee, MI 49660

Court Telephone No.
(231) 398-3406

Plaintiff's Name
Plaintiff's name before marriage

V.

Defendant's Name
Defendant's name before marriage

Summons must be completed and attached.

For my complaint, I state as follows:

- The Plaintiff has resided at least 180 days in Michigan immediately before filing this complaint and/or is an enrolled member of the Little River Band of Ottawa Indians.
- The Defendant has resided at least 180 days in Michigan immediately before filing this complaint and/or is an enrolled member of the Little River Band of Ottawa Indians.
- The marriage took place on _____ at _____.
Date Place of Marriage
- The Plaintiff and Defendant separated on _____ still live together.
- There has been a breakdown of the marriage relationship to the extent that the objects of matrimony have been destroyed and there remains no reasonable likelihood that the marriage can be preserved.
- There are are not minor children of the marriage.
- The wife is is not pregnant.
- There is is not property to be divided.

I request:

- A judgment of divorce
- An equitable division of property and debts.
- An equitable division of the costs of this action. Spousal support
- Child support
- My last name to be changed to: _____
- Any other relief that the court deems just and equitable.

Date

Signature of Plaintiff

**LITTLE RIVER BAND
OF OTTAWA INDIANS
TRIBAL COURT**

SUMMONS FOR DIVORCE

CASE NO.

Court address

Court telephone no.

Plaintiff's name(s), address(es), and telephone no(s).

Defendant's name(s), address(es), and telephone no(s).

v

Plaintiff's attorney, bar no., address, and telephone no.

Instructions: Check the items below that apply to you and provide any required information. Submit this form to the court clerk along with your complaint and, if necessary, a case inventory addendum (form MC 21). The summons section will be completed by the court clerk.

Domestic Relations Case

- There are no pending or resolved cases within the jurisdiction of the family division of the circuit court involving the family or family members of the person(s) who are the subject of the complaint.
- There is one or more pending or resolved cases within the jurisdiction of the family division of the circuit court involving the family or family members of the person(s) who are the subject of the complaint. I have separately filed a completed confidential case inventory (form MC 21) listing those cases.
- It is unknown if there are pending or resolved cases within the jurisdiction of the family division of the circuit court involving the family or family members of the person(s) who are the subject of the complaint.

Civil Case

- This is a business case in which all or part of the action includes a business or commercial dispute under MCL 600.8035.
 - MDHHS and a contracted health plan may have a right to recover expenses in this case. I certify that notice and a copy of the complaint will be provided to MDHHS and (if applicable) the contracted health plan in accordance with MCL 400.106(4).
 - There is no other pending or resolved civil action arising out of the same transaction or occurrence as alleged in the complaint.
 - A civil action between these parties or other parties arising out of the transaction or occurrence alleged in the complaint has been previously filed in this court, _____ Court, where it was given case number _____ and assigned to Judge _____ .
- The action remains is no longer pending.

Summons section completed by court clerk.

SUMMONS

NOTICE TO THE DEFENDANT: In the name of the people of the Little River Band of Ottawa Indians you are notified:

1. You are being sued.
2. **YOU HAVE 28 DAYS** after receiving this summons and a copy of the complaint to **file a written answer with the court** and serve a copy on the other party **or take other lawful action with the court.**
3. If you do not answer or take other action within the time allowed, judgment may be entered against you for the relief demanded in the complaint.
4. If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

Issue date	Expiration date*	Court clerk
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*This summons is invalid unless served on or before its expiration date. This document must be sealed by the seal of the court.

LITTLE RIVER BAND OF OTTAWA INDIANS TRIBAL COURT	PROOF OF SERVICE	CASE NO.
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Court Address
3031 Domres Road, Manistee, MI 49660

Court Telephone No.
(231) 398-3406

TO PROCESS SERVER: You must serve the Summons and Complaint and file proof of service with the Tribal Court. If you are unable to complete service, you must return this original and all copies to the Tribal Court.

CERTIFICATE OF SERVICE/NONSERVICE

(*Initial Summons and Complaint must be served personally or by registered/certified mail pursuant to LRCR 4.105)

I served* personally by registered or certified mail, return receipt requested, and delivery restricted to the addressee (copy of return receipt attached) by first-class mail a copy of the Summons and Complaint on:

I have attempted to serve a copy of the Summons and Complaint listed above and have been unable to complete service upon:

Name of Recipient (*Must be filled out by person requesting service)	Date and time of service
Place or address of service	

I am a sheriff, deputy sheriff, LRBOI Public Safety officer, bailiff, appointed court officer or attorney for a party.

I am a legally competent adult who is not a party or an officer of a corporate party. I declare under the penalties of perjury that this certificate of service has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Service fee	Miles traveled	Fee	
\$		\$	
Incorrect address fee	Miles traveled	Fee	TOTAL FEE
\$		\$	\$

Signature

Name (type or print)

ACKNOWLEDGMENT OF SERVICE

I acknowledge that I have received service of the Summons and Complaint on:

Date: _____

Signature

Name (type of print)