

<b>Little River Band of Ottawa Indians Tribal Court</b>	<b>COMPLAINT FOR DIVORCE</b>	<b>CASE NO.</b>
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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:**

1. The Plaintiff has resided at least 180 days in Michigan immediately before filing of this complaint or is an enrolled member of the Little River Band of Ottawa Indians.
2. The Defendant has resided at least 180 days in Michigan immediately before filing of this complaint or is an enrolled member of the Little River Band of Ottawa Indians.
3. The marriage took place on \_\_\_\_\_ at \_\_\_\_\_.  
Date Place of Marriage
4. The Plaintiff and Defendant separated on \_\_\_\_\_ still live together.
5. 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.
6. There are are not minor children of the marriage.
7. The wife is is not pregnant.
8. 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

<b>STATE OF MICHIGAN</b> JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	<h2 style="margin: 0;">SUMMONS FOR DIVORCE</h2>	<b>CASE NO.</b>
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Court address Court telephone no.

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

v

Defendant's name(s), address(es), and telephone no(s).
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**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 State of Michigan you are notified:

1. You are being sued.
2. **YOU HAVE 21 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** (28 days if you were served by mail or you were served outside this state).
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.

<b>Little River Band of Ottawa Indians Tribal Court</b>	<b>PROOF OF SERVICE</b>	<b>CASE NO.</b>
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Court Address  
3031 Domres Road, Manistee, MI 49660

Court Telephone No.  
(231) 398-3406

**To the Process Server:** You must make and file your return with the Court Clerk. If you are unable to complete service you must return this original and all copies to the Court Clerk.

**Document(s) Served:** \_\_\_\_\_

<b>CERTIFICATE/AFFIDAVIT OF SERVICE/NON-SERVICE</b>		
<p><b>OFFICER CERTIFICATE:</b> I certify that I am a Tribal Police Officer, State or County Officer, Bailiff, or Court Officer and that:</p>	OR	<p><b>AFFIDAVIT OF PROCESS SERVER:</b> Being first duly sworn, I state that I am a legally competent adult who is not a party or an officer of a Corporate party and state that: <i>(must be notarized)</i></p>

<b>Name of Recipient</b>	<b>Address of Service</b>
_____	_____
Date: _____	Time: _____
<p>I personally served a copy of the above-referenced documents upon the recipient.</p> <p>After diligent search and inquiry, I have been unable to find and serve the recipient.</p> <p>I have personally attempted to serve the above-referenced documents upon the recipient and have been unable to complete service because his/her address was incorrect at the time of filing.</p>	

I declare that the statements above are true to the best of my information, knowledge, and belief.

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

\*Acknowledged by \_\_\_\_\_ before me on this date: \_\_\_\_\_

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Notary public, State of Michigan, County of \_\_\_\_\_

Acting in the County of \_\_\_\_\_

My commission expires \_\_\_\_\_

Service fee	Miles traveled	Fee	
\$		\$	
Incorrect address fee	Miles traveled	Fee	<b>TOTAL FEE</b>
\$		\$	\$

**\*Process Server Only**

<b>Acknowledgment of Service:</b> I acknowledge that I have received service of the above-referenced documents on:	
Date: _____	Signature _____
Printed Name: _____	

**Return Proof of Service to:** \_\_\_\_\_