

**IN THE CROW TRIBAL COURT
 IN AND FOR THE CROW INDIAN RESERVATION
 P.O. BOX 489, CROW AGENCY, MT 59022
 PHONE: 406-638- 7400 FAX: 406-638-7415**

_____ Plaintiff(s) Vs. _____ Defendant(s)	Civil Case No. _____ CIVIL COMPLAINT
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THIS COMPLAINT MUST BE READABLE. PLEASE PRINT NEATLY.

Jurisdictional Statement: The Crow Tribal Court has subject matter jurisdiction over all causes of action arising within the exterior boundaries of the Crow Reservation pursuant to 3-2-205 of the Crow Law and Order Code. By completing and signing this petition, the petitioner affirms the parties of this case meet the personal or property jurisdictional elements pursuant to 3-2-203 and 3-2-204 respectively.

1. a. Plaintiff Information - Name: _____

_____ *Mailing Address* _____ *Physical Address (Street Address or Description)*

_____ *Home Phone* _____ *Cell Phone* _____ *Tribe Enrolled and/or Race*

b. Plaintiff Information - Name: _____

_____ *Mailing Address* _____ *Physical Address (Street Address or Description)*

_____ *Home Phone* _____ *Cell Phone* _____ *Tribe Enrolled and/or Race*

2. a. Defendant Information - Name: _____

_____ *Mailing Address* _____ *Physical Address (Street Address or Description)*

_____ *Home Phone* _____ *Cell Phone* _____ *Tribe Enrolled and/or Race*

b. Defendant Information - Name: _____

_____ *Mailing Address* _____ *Physical Address (Street Address or Description)*

_____ *Home Phone* _____ *Cell Phone* _____ *Tribe Enrolled and/or Race*

If there are more than 2 plaintiffs or defendants, please check this box and attach supplemental sheet which must provide the same party information as requested above .

CAUSE OF ACTION

4. The Cause of Action for this Complaint is (i.e.: Breach of Contract, Personal Injury, Negligence, Property Loss/Damage, Fraud, etc. Pleases list all Causes of Action if more than one):

5. Statement of Facts (State what happened, where it happened, and a list of what the defendant has done OR has not done that caused the Plaintiff harm, injury, loss, and/or damage. The complaint must describe the harm, injury, loss, and/or damage suffered by the Plaintiff for each cause of action.)

RELIEF REQUESTED

6. Wherefore, based on the above statements, the Plaintiff requests this court order the following judgment(s) and/or relief in favor of the Plaintiff:

a. _____;

b. _____;

c. Other: _____;

And any and all further relief determined necessary and proper.

7. I hereby certify that the above statements are true and correct to the best of my knowledge, information and belief.

Signature of Plaintiff

Date: _____

Signature of Plaintiff

Date: _____

Signature of Plaintiff

Date: _____

Signed and sworn before me on this _____ day of _____ 20__.

Seal

Court Clerk or Public Notary