

**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**

<p>IN THE MATTER OF: _____, Plaintiff(s) Vs. _____, Defendant(s)</p>	<p>Civil Case No. _____ MOTION _____ <i>Title of Motion</i></p>
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STATEMENTS OF MOVEANT

I respectfully move this court to _____
 Briefly state what you want the Court to do

The reasons for this motion are as follows (attach documentation if necessary):

WHEREFORE, based on the above reasons, the Moveant respectfully requests:

1. That the court grant the relief requested by this Motion;
2. If deemed needed by the court, to set a hearing within a reasonable time to allow response from the other parties as listed in this petition;
3. For other relief the court deems just and proper.

I hereby affirm that the above statements are true and accurate to the best of my knowledge and belief.

 Moveant Signature Date: _____

SIGNED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 201

SEAL

 Clerk, Crow Tribal Court

NOTE TO MOVEANT: If there are other parties to this action, you must serve a copy of this motion on the party(ies), advocate, or attorney and file the Certificate of Service with this court before any action can be taken on the Motion . The Crow Tribal Court will not perform the service of process for you.

If you are mailing the Motion, you must indicate whether it was via U.S. regular first class mail or certified mail and list the name and address of the person, and the date you mailed the document.

If you are having the document personally served, you must indicate the date, time, and location the document was served, and who served the document along with the server's signature and contact information.

Remember, your Certificate of Service must be filed with the Crow Tribal Court.

CERTIFICATE OF SERVICE

I hereby certify that a copy of the above _____ was served upon
Name of Document
_____ by _____
Name of opposing party or counsel *Mail or hand-delivery*
at _____ on _____
Address *Date/Time if by personal service*

Signed: _____

Date: _____