STOCKBRIDGE-MUNSEE TRIBAL COURT

Mohi	can Nation			Stockbr	ridge-Mun	see Community
		-)))		PETITION	FOR
		Petitioner,) TEMPORARY RESTRAINING) ORDER (Domestic/Family Violence)			
		- - -)))	Case 1	No	
		Respondent.)			
Respo	ndent's					
OOB:	SEX:	RACE:	HEIGHT:	WEIGHT:	HAIR:	EYES:
Respoi	-	ction 64.1 of th	ne Stockbridge	straining order -Munsee Tribal	•	ction against the Court Code
1.	My Residence	e /premises are	stated as abov	re.		
2.	I, the Petitioner am asking The Stockbridge-Munsee Tribal Court to issue a temporary restraining order and/or injunction ordering the Respondent to perform or restrain from acts that will have a direct effect on the Petitioner.					
3.	The Respondent qualifies as one of the defined categories under Chapter 64.1(D) Section: Family or household Member.					
4.	Under Chapte	er 64.1 (D) Sec	tion: Domestic	and Family Vi	olence (1) th	ose are defined as:
	□ intentional	infliction of ph	nysical harm to	a family or hou	isehold mem	ber;
		d, gesture or ar ninent physical	•	or that places a	family or ho	ousehold member
				intimidation, h		

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a causing a family or household member to engage involuntarily in sexual activity by force, coercion, threat, intimidation, humiliation, confinement, or administering alcohol or drugs to the family or household member without their knowledge.

- 5. $I \square am \square am$ not in imminent danger of physical harm.
- 6. □yes □no Attached as a part of this petition is a statement of facts indicating the Respondent has committed acts that have had a significant impact and possible irreparable harm to the Petitioner.

I REQUEST THAT THE COURT:

Immediately issue a temporary restraining order and set a time for a hearing on an injunction requiring the Respondent to:

- 1. Refrain from my residence, contacting me, and committing acts of domestic abuse against me.
- 2. Enter an injunction for a period of time the court sees suitable.
- 3. Notify the Respondent's that this Petition has been filed and proved them with a copy.

Subscribed and sworn before me	
This, 20	
NOTARY PUBLIC	
COUNTY OF	
My Commission Expires	
	-
	Signature of Petitioner
	 Date

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