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2
3 IN THE COURT OF THE
4 CONFEDERATED TRIBES OF THE COLVILLE RESERVATION
5

6 _____,
Petitioner/Plaintiff,
7
8 vs.
9 _____,
Respondent/Defendant,
10

Case No.:

MOTION AND AFFIDAVIT

11
12 1. I am asking the Court to do the following:

13 A. _____

14 B. _____

15 C. _____

16
17 2. ☐ I do need a hearing on this request. The hearing will last no more than one (1) hour.

18 ☐ _____ hours needed for hearing.

19 ☐ _____ days needed for hearing.

20 3. ☐ I do not need a hearing on this request.

21 AFFIDAVIT

22 City of Nespelem)
ss.

County of Okanogan)

23 I, _____, swears and deposes under oath the following:

24 1. I am the _____ (which party) in this action.

25 1 of 2

Colville Tribal Court
P.O. Box 150
Nespelem, WA 99155
509/634-2500
509/634-2479 (fax)

2. I am asking this motion based on the following facts:

A. _____

B. _____

C. _____

3. If any further information is necessary, I can be reached at:

Address: _____

City/State/Zip _____

Phone: (____) _____ - _____

Dated this _____ day of _____, 20____.

Affiant's Signature

SUBSCRIBED AND SWORN to before me this _____ day of
_____, 20____. Notary Public in and for
the State of _____, residing at _____
My Commission expires: _____

Notary Signature

APPROVED/CONCURRED by

opposing party/counsel _____