

INTERTRIBAL COURT OF SOUTHERN CALIFORNIA

49002 Golsh Road Valley Center, California 92082

Phone: (760) 751-4142

Fax: (760) 751-3078

Web: www.sciljc.org



ANSWER

<p>Petitioner's Full Name, Mailing Address, and Phone Number</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <p>Respondent's Full Name, Mailing Address, and Phone Number</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<hr/> <p>Tribe</p> <hr/> <p>Case Number</p> <hr/>	<p>FOR COURT USE ONLY</p>
---	---	----------------------------------

I, _____, allege the following (attach additional pages if necessary):

A statement of the allegations I deny on the basis of my information and belief or because I lack sufficient information or belief

A statement of the essential facts of the case that I admit as true

A statement of the allegations I affirmatively set forth as defense(s), including but not limited to petitioner's comparative fault or the expiration of the statute of limitations

A statement of the relief I am seeking, including but not limited to the costs of suit

I affirm that I understand my obligation under the Intertribal Court of Southern California Code of Civil Procedure and Rules of Court or relevant tribal analogue to (1) serve a copy of this Answer on the Petitioner and (2) file a copy of this Answer and proof of its service with the Court Clerk within 30 business days of receiving the Summons and the Complaint.

I further affirm that the statements set forth above are accurate and complete to the best of my knowledge.

Signature

Date