Name	-
Mailing Address	-
City, State Zip Code	-
Phone Number Email	-
☐ Petitioner/Plaintiff (without attorney/advocate) ☐ Respondent/Defendant (without attorney/advocate) ☐ Attorney/Advocate for	re)
	DERATED SALISH AND KOOTENAI TRIBES VATION, PABLO, MONTANA
Petitioner(s)/Plaintiff(s)	Cause No.
and	VERIFIED NOTICE TO COURT
Respondent(s)/Defendant(s)	
	ttach additional pages and indicate the corresponding fill out the entire form . If a section does not apply,
I am the □Petitioner/Plaintiff □Respondent/De	efendant 🗖 Other:in this action.
1. I am providing notice to the Court of the	e following:

RESPECTFULLY SUBMITTED this day o	of, 20by:
Signature of: Petiti Respondent/Respo Attorney/Advocat	
I,, swear/affin	rm under penalty of perjury that I have read
Foregoing document and that the information proving my knowledge.	ided set forth therein is true and correct to the
Signature	Date
Subscribed and sworn to or affirmed before me at _ lay of,	, Montana on the
SEAL)	Clerk of Court, Notary Public or other person authorized to administer oath.
	My commission expires:
I,accurate copy of the NOTICE to the opposing part	
20, at the addresses given below.	<u> </u>
Signature	

CV-NOTICE [TCF 0134] (11/23)