



IN THE TRIBAL COURT FOR THE HOOPA VALLEY TRIBE

ANSWER TO REQUEST FOR RESTRAINING ORDER

- Temporary
Permanent

CASE NO.

Court Address
P.O. Box 1389 Hoopa, CA 95546

Court telephone no.
(530) 625-4305

I. PARTIES' INFORMATION

1. Name of person who asked for the order against you:
(Petitioner):

\_\_\_\_\_

2. Your name (Respondent):

\_\_\_\_\_

3. Your current mailing address
(skip this if you have an attorney or spokesperson)

\_\_\_\_\_

4. Name, business address and Phone number of your Attorney or Spokesperson:

\_\_\_\_\_

5. I do do not agree that the additional persons listed in # 6 of the Request for Order should be included in the order.
If you do not agree, explain why not:

\_\_\_\_\_

6. I do do not agree that the protected person and I have the relationship listed in # 7 of the Request for Order.
The correct description of our relationship is:

\_\_\_\_\_

7. Other Court Cases

I do do not agree with the information listed in # 8 of the Request for Order about the other court cases that I have been involved in with the Petitioner.

The correct information is: \_\_\_\_\_

\_\_\_\_\_

II. History of Threatening, Assaultive, or Harassing Actions

8. Describe the most recent Abuse

I do do not agree with the Petitioner's description of the "Most Recent Abuse" listed in # 9 of the Request for Order.

The correct information is: \_\_\_\_\_

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9. Describe any other Incidents of Abuse.

I  do  do not agree with the Petitioner's description of the "Other Incidents of Abuse" listed in # 10 of the Request for Order.

The correct information is:

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Lined area for writing answers.

Check here if you need additional room to continue your answer. *Attach additional sheets if necessary to complete your answer.*

**III. ANSWER TO REQUESTED ORDERS:** *(Check all boxes that apply)*

10.  Personal Conduct Orders

a. I  do  do not agree to the order requested.

11.  Stay Away Order

I  do  do not agree to the order requested

12.  Record Unlawful Communications

I  do  do not agree to the order requested

13.  Other Orders

I  do  do not agree to the order requested

**I declare under penalty of perjury of the laws of the Hoopa Valley Tribe that the above is true and correct to the best of my knowledge.**

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature



IN THE TRIBAL COURT  
FOR THE HOOPA VALLEY  
TRIBE

PROOF OF SERVICE  
BY U.S. MAIL

CASE NO.

Court Address  
P.O. Box 1389 Hoopa ,CA 95546

Court telephone no.  
(530) 625-4305

1. At the time of the service I was **at least 18 years old** and **not a party to this case**. I am a resident of or employed in the county where the mailing took place.

2. **My name**, residence, or business address and phone number are:

a. Name: \_\_\_\_\_

b. Address: \_\_\_\_\_

c. Phone number: \_\_\_\_\_

3. On (date) \_\_\_\_\_ I mailed from (city and state) \_\_\_\_\_ the following documents (list names of all documents that were mailed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. I served the documents by enclosing them in an envelope and (check one):

a.  depositing the sealed envelope with the United States Postal Service with the **First Class** postage fully prepaid.

b.  depositing the sealed envelope with the United States Postal Service after paying the postage for **certified mail, return receipt requested** (attach copy of receipt).

5. The envelope was addressed as follows: :

a. Name of Person served: \_\_\_\_\_

b. Address of Person Served: \_\_\_\_\_

6. I declare **under penalty of perjury** of the laws of the Hoopa Valley Tribe that the above is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of person who served the papers)