



## PUEBLO OF LAGUNA COURT CIVIL COVER SHEET

This document is CONFIDENTIAL, and shall not be disclosed to the public. The purpose of this document is to assist the Court in keeping accurate records and making sure that we notify the correct parties of upcoming Court hearings.

Because you started this legal action, **you are called the Petitioner(s)**. The person(s) that you are bringing the action against **are called the Respondent(s)**.

**\*\*\* Note:** To avoid unnecessary delay, it is important all information is filled in accurately or to the best of your knowledge.

### **PETITIONER:**

Name: \_\_\_\_\_ DOB: \_\_/\_\_/\_\_ Social Security # \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Enrollment #: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

### **PETITIONER:**

Name: \_\_\_\_\_ DOB: \_\_/\_\_/\_\_ Social Security # \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Enrollment #: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

### **RESPONDENT:**

Name: \_\_\_\_\_ DOB: \_\_/\_\_/\_\_ Social Security # \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Enrollment #: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

### **RESPONDENT:**

Name: \_\_\_\_\_ DOB: \_\_/\_\_/\_\_ Social Security # \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Enrollment #: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Not Reinstated

In The Laguna Tribal Court of the Pueblo of Laguna  
State of New Mexico

\_\_\_\_\_  
*Petitioner,*

NO: \_\_\_\_\_

-VS-

\_\_\_\_\_  
*Respondent*

Petition For Legal Separation

*Comes Now the Petitioner and states:*

1. That the *Petitioner* is an enrolled member of the \_\_\_\_\_  
Tribal/Pueblo and resides at \_\_\_\_\_  
*Village -Current Resident (address)*

2. That the *Respondent* is an enrolled member of the \_\_\_\_\_  
Tribe/Pueblo and resides at \_\_\_\_\_  
*Village -Current Resident (address)*

3. That the *Petitioner* and *Respondent* were married on the \_\_\_\_\_ day of  
\_\_\_\_\_ 19\_\_\_\_ County of \_\_\_\_\_, State of  
\_\_\_\_\_.

4. That the *Petitioner* and *Respondent* have been separated since  
\_\_\_\_\_, 20 \_\_\_\_.

5. That *Petitioner* and *Respondent* have said minor child/children:

<u>Name(s)</u>	<u>Date of Birth</u>
_____	_____
_____	_____
_____	_____
_____	_____



10. That the *Petitioner* is in need of child support for herself/himself and/or the child/children, and that the *Respondent* is able to provide financial support.

*Therefore the Petitioner asks the Court to:*

1. Grant a Decree for Legal Separation on the grounds stated below:
2. Divide the property as follows:

*To The Petitioner*

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*To The Respondent*

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3. Divide the debt(s) as follows:

*To The Petitioner*

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*To The Respondent*

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4. Grant the *Petitioner* physical custody of the child/children with reasonable visitation rights for the *Respondent*.

5. Grant the *Petitioner* a reasonable amount of child support in the amount \$ \_\_\_\_\_ and maintenance for herself/himself and/or the child/children.

6. That the *Petitioner/Respondent* desire to restore her maiden name from \_\_\_\_\_ to \_\_\_\_\_.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*Telephone*