Petitioner, -against-	<u>PETITION</u> : (Violation of Order of Protection)	
	File No.:	
Respondent,	Case No.:	
PETITIONER: (information about yourself)	RESPONDENT: (information about other party)	
STREET:	STREET:	
CITY/STATE:	CITY/STATE:	
ZIP: COUNTY:	ZIP:COUNTY:	
TERRITORY:	TERRITORY:	
DOB:AGE:	DOB:AGE	
ENROLLED: YES / NO	ENROLLED: YES / NO	
TRIBE:	TRIBE:	
ENROLLMENT #:	ENROLLMENT #:	
HOME TEL #:	HOME TEL #:	
EMPLOYER:	EMPLOYER #:	
WORK TEL #:	WORK TEL #:	
LAY-ADVOCATE/ ATTORNEY:	LAY-ADVOCATE/ ATTORNEY:	
ADDRESS:	ADDRESS:	
TEL #:	TEL #:	
**************************************		
1. a. By Order of this Court, dated	, the $\square$ Petitioner	
	e following conditions of behavior:	

	<b>b</b> . By Order of	Court, dated	,
		<b>dent</b> was directed to observe the fo	
2.	· •	lief) □ Petitioner □ Respondent date(s),description(s) and location(	
3.	The following child(ren) is / are the subject(s) of the proceeding resulting in the issuance of the <b>Order</b> alleged to have been violated:		
	Name	Date of Birth	<u>Tribal #</u>
4.		as been made to any Court or Judge:	

WHEREFORE,□ Petitioner □ Respond	lent requests that the $\square$ Petitioner $\square$ Respondent be
•	provisions of law and for such relief as the Court may
deem just and proper.	· ·
J	
	X
(Date)	(Signature of $\square$ Petitioner $\square$ Respondent)
()	
(Phone Number)	(Print Name)
** <u>NOTE</u> : SIGN YOUR NAME IN THE PI	RESENCE OF COURT CLERK/ NOTARY PUBLIC**
SENECA NATION OF INDIANS )	
CATTARAUGUS / ALLEGANY )	WEDNES CA THON
TERRITORY ) s	s.s.: <u>VERIFICATION</u> :
On this day of	20 hafara ma maraamalla
	, 20 before me personally to me known to be the same person
_	ng motion; and who duly acknowledged that the
information is true and correct to the best	of their knowledge and belief.