



Yurok Tribal Court

RESPONSE TO REQUEST FOR RESTRAINING ORDER - CIVIL HARASSMENT

(1) Name of person asking for protection:

Clerk stamps here when filed.

(2) Your Name:

Your lawyer, advocate or spokesperson (if you have one):

Name: _____ Tribal Bar No: _____

Firm Name: _____ State Bar No: _____

Address: (If you have a lawyer, advocate, or spokesperson for this case, give your lawyer's or spokesperson's information. If you do not have a lawyer and want to keep your home address private, give a mailing address instead. You do not have to give your telephone, fax, or e-mail.):

Address: _____

City: _____ State: _____ Zip: _____

Telephone (_____) _____ Fax: _____

Email: _____

Are you an enrolled member of a Tribe? Yes No

If yes, which Tribe? (Specify): _____

Use this form to give the Court your answers to YTC—CH—100:

- Fill out this form and then take it to the Yurok Tribal Court Clerk
- Serve the person named in (1) with a copy of this form.
- Any other Party to this action may not personally serve this document.
- This document shall be hand delivered or mailed by a person who is not a Party to this action, and who is not less than 18 years of age.

Check the appropriate boxes

(3) **Personal Conduct Orders**

- I agree to the order requested
- I do not agree to the order requested.
- I would agree to the following order (specify):

(4) **Stay Away Orders**

- I agree to the order requested
- I do not agree to the order requested.
- I would agree to the following order (specify):

Yurok Tribal Court
230 Klamath Blvd.
Klamath, CA 95548
707-482-1350

Case Number:

The Court will consider your answer at the hearing. Write your hearing date and time here:

Date: _____ Time: _____

You must obey the Court's orders until the hearing. If you do not come to this hearing, the Court may make the orders requested against you last for up to 3 years.



Protected Party v. Restrained Party

Case Number:

(5) **Turn In Guns or Other Firearms**

- a. I do own or have guns and/or firearms.
- b. I do not own or have any guns and/or firearms.
- c. I agree to the order requested.
- d. I do not agree to the order requested.
- e. I would agree to the following order (*specify*):

(6) **Other Orders**

- a. I do not agree to the order requested.
- b. I would agree to the following order (*specify*):

(7) **Lawyer's/Advocate's Fees and Costs**

- a. I agree to the order requested
- b. I do not agree to the order requested.
- c. I would agree to the following order (*specify*):

I ask the Court to order payment of: Lawyer's/Advocate's fees Out-of-pocket expenses

The amounts requested are:

Item	Amount	Reason	Date
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____

Check here if you need more space. Attach a sheet of paper and write "YTC-CH-100, item 10—
Lawyer's/Advocate's Fees and Costs" at the top of the page.

(8) **Denial**

- a. I did not do anything described in (7) or (8) of Form YTC—CH-100.
- b. I did some or all of the things described in (7) or (8) of Form YTC—CH-100.

(9) **Reasoning:** (*List facts or reasons below*):

Check here if you need more space. Attach a sheet of paper and write "YTC—CH—140, Item :—*Facts and Reasons*" at the top. Give specific facts and reasons.



Protected Party v. Restrained Party	Case Number:
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Number of pages attached to this form, if any: _____

I declare under penalty of perjury that the information above is true and correct.

Date: _____

Attorney's or Advocate's name (if applicable)

Signature

Type or print your name

Signature