

\_\_\_\_\_  
Name

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

\_\_\_\_\_  
City, State      Zip Code

\_\_\_\_\_  
Phone Number                      Email

- Petitioner//Plaintiff (without attorney/advocate)
- Attorney/Advocate for \_\_\_\_\_

IN THE TRIBAL COURT OF THE CONFEDERATED SALISH AND KOOTENAI  
TRIBES OF THE FLATHEAD RESERVATION, PABLO, MONTANA

<p>_____ Petitioner(s)/Plaintiff(s)</p> <p>and</p> <p>_____ Respondent(s)/Defendant(s)</p>	<p>Cause No. _____</p> <p style="text-align: center;"><b>REQUEST FOR DEFAULT HEARING</b></p>
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COMES NOW, Petitioner/Plaintiff, \_\_\_\_\_, and respectfully request that  
this Court set a hearing on the following matter: \_\_\_\_\_

1. **Status of case.** Respondent/Defendant did not appear or otherwise respond to the Petition. More than 15 days have passed since Respondent/Defendant was served. Petitioner/Plaintiff asks the clerk to enter default against Respondent/Defendant.
2. **Service.** Respondent/Defendant was served the \_\_\_\_\_ (title of pleading) on \_\_\_\_\_ (date) by \_\_\_\_\_ (method of service). Proof of Service was filed with the Court on \_\_\_\_\_.
3. **Request for Default Hearing.** Respondent/Defendant did not appear or otherwise respond to the Petition.

RESPECTFULLY SUBMITTED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ by:

\_\_\_\_\_  
Signature of:  Petitioner/Plaintiff  
 Attorney/Advocate for \_\_\_\_\_

**CERTIFICATE OF MAILING**

I, \_\_\_\_\_, do hereby certify that I mailed a true and accurate copy of the **REQUEST FOR DEFAULT HEARING** was filed with the Court and simultaneously mailed to the opposing parties on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at the addresses given below.

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

\_\_\_\_\_  
Signature