

IN THE TRIBAL COURT OF THE PRAIRIE ISLAND  
MDEWAKANTON DAKOTA COMMUNITY

PRAIRIE ISLAND INDIAN RESERVATION

STATE OF MINNESOTA

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Case Number

Vs

Petition for Child Support

\_\_\_\_\_  
Respondent

Failure to provide the Petitioner's and Respondent's  
complete information WILL delay the filing of this petition.

**Petitioner's Name:** \_\_\_\_\_

Petitioner's Physical Address: \_\_\_\_\_  
\_\_\_\_\_

Petitioner's Mailing Address (including zip code): \_\_\_\_\_  
\_\_\_\_\_

Petitioner's Phone Number: \_\_\_\_\_

**Respondent's Name:** \_\_\_\_\_

Respondent's Physical Address: \_\_\_\_\_  
\_\_\_\_\_

Respondent's Mailing Address (including zip code): \_\_\_\_\_  
\_\_\_\_\_

Respondent's Phone Number: \_\_\_\_\_

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**PRAIRIE ISLAND INDIAN RESERVATION**

**STATE OF MINNESOTA**

Comes now the *Petitioner* and respectfully petitions this **Court** as follows:

That the *Petitioner* is the Natural \_\_\_\_\_ **Mother** \_\_\_\_\_ **Father** and is the Custodial Parent of: (please list child or all children below)

- |    |       |               |       |
|----|-------|---------------|-------|
| 1. | _____ | Date of Birth | _____ |
| 2. | _____ | Date of Birth | _____ |
| 3. | _____ | Date of Birth | _____ |
| 4. | _____ | Date of Birth | _____ |
| 5. | _____ | Date of Birth | _____ |

The child/children \_\_\_\_\_, **are** enrolled members of the Prairie Island Mdewakanton Dakota Community.

The child/children \_\_\_\_\_, **are not** enrolled members of the Prairie Island Mdewakanton Dakota Community.

The child/children \_\_\_\_\_, **do** live on the Prairie Island Indian Reservation.

The child/children \_\_\_\_\_, **do not** live on the Prairie Island Indian Reservation.

That the *Petitioner* has physical custody of said minor child/children, and has had such custody since \_\_\_\_\_.

**Custody** \_\_\_\_\_ was established through a Court Order; \_\_\_\_\_ was not established through a Court Order.

**OR**, \_\_\_\_\_ there has been no determination of legal custody of said minor child/children.

That the *Respondent* is financially able to pay \$\_\_\_\_\_ each month for the care, support, and maintenance of said minor child/children until the age of majority or until such time as he/she/they graduate from high school, whichever occurs last or is otherwise emancipated.

That the amount identified in the above paragraph \_\_\_\_\_ **does** comply, \_\_\_\_\_ **does not** comply with the Prairie Island Child Support Guidelines identified in Title 3, Chapter III, Section 7.

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That the *Respondent* is financially able to provide medical and health insurance for the benefit of the minor child/children of the parties and to pay all professional health care costs incurred on behalf of said minor child/children until said child/children shall reach the age of majority or until such child/children graduates from high school, whichever occurs last, or is otherwise emancipated.

That *Petitioner* does not have sufficient property or money to provide the funds necessary to prosecute this action and pay a reasonable sum for \_\_\_\_\_ **his**, \_\_\_\_\_ **her** attorney's fees (if applicable) and court costs in this action; that *Respondent* is financially able to pay *Petitioner* a reasonable sum of \_\_\_\_\_ **his**, \_\_\_\_\_ **her** attorney's fees (if applicable) and costs in this action.

That *Petitioner* \_\_\_\_\_ **has**, \_\_\_\_\_ **has not** filed a petition for child support in any other court. *If yes, Name* of the Court: \_\_\_\_\_

WHEREFORE, *Petitioner* prays:

1. That the *Respondent* be ordered to pay *Petitioner* the sum of \$\_\_\_\_\_ (amount of support) each month for the care, support, and maintenance of the minor child/children of the parties, named above in this petition, until said minor child/children reach the age of majority or graduates from high school, whichever occurs last, or is otherwise emancipated.
2. That *Respondent* be ordered to provide medical and dental insurance for the benefit of the minor child/children of the parties until said minor child/children reach the age of majority or graduates from high school, whichever occurs last, or is otherwise emancipated.
3. That *Respondent* be required to pay to *Petitioner* a reasonable sum for \_\_\_\_\_ **his**, \_\_\_\_\_ **her** necessary (attorney's fees) and other costs in this action.
4. For such other and further suitable relief as to this Court may seem just and proper.

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\_\_\_\_\_  
Name of Attorney

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Address of Attorney

\_\_\_\_\_  
Phone number of Attorney

**PRAIRIE ISLAND INDIAN RESERVATION  
STATE OF MINNESOTA**

The above-named Petitioner being first duly sworn on oath, state that he/she has read this petition, signed his/her name, that they know it's contents, and that this petition is true to his/her best information and belief.

Subscribed and sworn to before me this  
\_\_\_\_\_ day, of \_\_\_\_\_, of 20 \_\_\_\_ .

\_\_\_\_\_  
Signature of Notary Public or Other Official