

PERSON FILING PAPERS <i>(Name and address, include Karuk Tribal Bar # if applicable):</i>  <hr/> <p style="text-align: center;">TELEPHONE NO. : <span style="margin-left: 150px;">FAX NO. (Optional):</span></p> <p>E-MAIL ADDRESS <i>(Optional)</i> :</p> <p>ATTORNEY FOR <i>(Name)</i> :</p>	FOR COURT USE ONLY
<p><b>KARUK TRIBAL COURT</b></p> <p>STREET ADDRESS:</p> <p>MAILING ADDRESS: <b>P.O. Box 629</b></p> <p>CITY AND ZIP CODE: <b>Yreka, CA 96097</b></p> <p>TELEPHONE NO.: <b>(530) 842-9228</b> <span style="margin-left: 100px;">FAX NO.: <b>(530) 842-9227</b></span></p>	
PLAINTIFF/PETITIONER:  DEFENDANT/RESPONDENT:	
<b>FACSIMILE TRANSMISSION COVER SHEET</b>	CASE NUMBER:

**TO THE COURT:**

1. **Please file** the following transmitted documents in the order listed below:

Document name

No. of pages

2.  **Processing instructions** consisting of: \_\_\_\_\_ pages are also transmitted.

3.  **Fee required**     Filing fee     Fax fee: \$\_\_\_\_\_

\_\_\_\_\_  
(TYPE OR PRINT NAME OF CARDHOLDER)

▶

\_\_\_\_\_  
(SIGNATURE OF CARDHOLDER)