



**LITTLE TRAVERSE BAY BANDS OF ODAWA INDIANS TRIBAL COURT**

**Mailing Address: 7500 Odawa Circle ~ Harbor Springs, MI 49740 ~ (231) 242-1462**

**SUMMONS**

Civil Action, File Number \_\_\_\_\_

_____	)	
(Plaintiff)	)	
	)	
v	)	Summons
	)	
_____	)	
(Defendant)	)	

*To the above-named Defendant:*

In the name of the people of the Little Traverse Bay Bands of Odawa Indians, you are hereby

summoned and required to serve upon \_\_\_\_\_,  
Plaintiff

whose address is \_\_\_\_\_,

an answer to the complaint which is herewith served upon you, within **28 days after service** of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

\_\_\_\_\_  
Date Issued

\_\_\_\_\_  
Court Clerk

This summons expires on \_\_\_\_\_ (91 days) after the complaint is filed and is  
Date  
invalid unless served on or before the last date on which it is valid.