CASE NAME:		CASE NO.:	
		nanent Protection Order, form DV-101. (To control of property for duration of Protection	
NOTE TO PETITIONER/PERSON TO BE PROTECTED: You are asked to complete this Attachment because you have check box 2(e) on the Petition for Temporary or Permanent Protection Order. You will need to complete this information and sign the document under penalty of perjury. Fill out any section that applies. The reference to 'you' or 'my' or 'me' refers to the PERSON TO BE PROTECTED.]			
☐ Home located at: (<i>physical a</i>	address)		
□ Vehicle: Make:	; Model:	; Year:	
Color:	; Mileage:		
☐ Bank account: Bank name: _			
Type of account: ☐ Ch	ecking; Savings; Money mar	ket account: ☐ Certificate of deposit (CD);	
☐ Individual retirement	t arrangement (IRA); Brokerage	account	
☐ Bank account: Bank name: _			
Type of account: ☐ Ch	ecking;	ket account: ☐ Certificate of deposit (CD);	
☐ Individual retirement	t arrangement (IRA); □ Brokerage	account	
☐ Bank account: Bank name: _			
Type of account: ☐ Ch	ecking;	ket account: ☐ Certificate of deposit (CD);	
	t arrangement (IRA); Brokerage nts, attach separate sheet with bank		
		ed wireless phone account for the following a jointly or \square solely to the Respondent.	
Phone Number (<i>include area code</i>	e) The number is:		
()	□ my number; □the number o	of a child in my care or custody	

CASE NAME:		CASE NO.:	
()	□ my number; □the number of a	☐ my number; ☐the number of a child in my care or custody	
()		☐ my number; ☐ the number of a child in my care or custody	
(If you need more space, plea	ase attach separate sheets.)		
☐ I ask the court ord	ler Respondent to make payments for the wirel	less phone account(s) listed above because:	
The wireless provide	er is:		
☐ I ask that the cour numbers listed above	t order Respondent to transfer the billing response to me.	onsibility and rights to the wireless phone	
☐ I ask that the cour	t allow Respondent to keep the following phor	ne number in Respondent's name alone:	
Phone Number (incli	ude area code) The number is: ()		
☐ Tribal Stipends for Min time:	ors. The following child/ren, in my care or cu	astody, receives Tribal stipends from time to	
Name of child:		Age:	
Name of child:		Age:	
Name of child:		Age:	
	der to give only me the temporary control over sh and use their Tribal stipend(s) and order that	*	
~ *	ts. I ask that the Court order that Respondent ne use any Tribal Per Capita payments distribut	not attempt to solely take, cash, borrow against, ted in my name.	
	·	se or log onto the following social media any pretense of pretending to be me in order to	
□Other property control: ((List & give reason for request)		
I declare under penalty of percorrect.	rjury under the laws of the Robinson Rancheri	a Tribal Court that the foregoing is true and	
Petitioner's Name	Petitioner's Signature	Date	