

<p>Attorney or Party Without Attorney (Name & Address) (ACBCI/State Bar Number) Phone Number:</p> <p>ATTORNEY FOR (NAME):</p>	<p style="text-align: center;"><i>FOR COURT USE ONLY</i></p>
<p>Insert name of court, judicial district or branch court, if any, and post office and street address:</p> <p>AGUA CALIENTE BAND OF CAHUILLA INDIANS TRIBAL COURT 980 E. Tahquitz Canyon Way Palm Springs, California 92262</p>	
<p>PLAINTIFF:</p>	
<p>DEFENDANT:</p>	
<p>ANSWER—Bodily Injury/Personal Injury/Property Damage</p> <p><input type="checkbox"/> COMPLAINT OF (name):</p>	<p>CASE NUMBER:</p>

1. This pleading, including attachments and exhibits, consists of the following number of pages: _____

DEFENDANT (name):

2. Generally **denies** each allegation of the unverified complaint.
3. a. **DENIES** each allegation of the following numbered paragraphs:

 b. **ADMITS** each allegation of the following numbered paragraphs:

 c. **DENIES, ON INFORMATION AND BELIEF**, each allegation of the following numbered paragraphs:

 d. **DENIES, BECAUSE OF LACK OF SUFFICIENT INFORMATION OR BELIEF TO ANSWER**, each allegation of the following numbered paragraphs:

 e. **ADMITS** the following allegations and generally denies all other allegations:

SHORT TITLE:

CASE NUMBER:

ANSWER—Bodily Injury/Personal Injury/Property Damagef. DENIES the following allegations and admits all other allegations:g. Other (*specify*):**AFFIRMATIVELY ALLEGES AS A DEFENSE**4. The comparative fault of plaintiff (*name*): as follows:5. Failure to comply with the claim filing requirements under Agua Caliente Tribal Code Section 3.16.080 as follows:6. Other (*specify*):

7. DEFENDANT PRAYS

For costs of suit and that plaintiff take nothing.

 Other (*specify*):_____
(Type or print name)_____
(Signature of party or attorney)