

**IN THE
HO-CHUNK NATION TRIAL COURT**

In the Interest of Decedent:

Decedent's Name

By _____,
Petitioner.

**PETITION FOR PROBATE OF
DECEDENT'S NON-TRUST PROPERTY**

Case No.: **PR** _____ - _____
[assigned by the Court]

I. JURISDICTION

This Court has the authority to dispose of Ho-Chunk Nation members' property pursuant to the HO-CHUNK NATION PROBATE CODE FOR NON-TRUST PROPERTY, 8 HCC § 13.

III. PETITIONER'S INFORMATION

1. The following information relates to the petitioner:

1. Name: _____
2. Relationship to Decedent: _____
3. Address: _____
(state physical address also if P.O. Box is listed)

City State Zip Code
4. Phone: (_____) _____ (_____) _____
Home Work
5. E-mail Address: _____
6. Ho-Chunk Nation Tribal Enrollment No.: _____

II. DECEDENT'S INFORMATION

2. I am petitioning the Court for probate of the decedent's non-trust property on behalf of:
(choose one)

- an adult deceased Ho-Chunk Tribal Member, OR
 a deceased minor child/ward as a: (*please specify*)
 parent of the minor child/ward, OR
 a court-appointed legal guardian of the estate of the child/ward

3. The decedent's full legal name is: _____

4. The decedent's Ho-Chunk Nation tribal enrollment number is: No. 439A00 _____

Enrollment status: Enrolled Removed from membership

5. Decedent's Date of Birth: _____

6. Decedent's Date of Death: _____

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7. Indicate which item(s) you are seeking to be probated:

a. Children's/Incompetent's Trust Fund

b. Per Capita Distribution

Verification from the following agencies certifying whether decedent owed any debts to the Nation should be included with the *Petition* if 6a or 6b are selected: Ho-Chunk Nation Child Support Agency, Ho-Chunk Nation Department of Treasury, Ho-Chunk Nation Department of Justice, Ho-Chunk Nation Trial Court.

c. Will

d. Estate without a will

SKIP TO SECTION 10 IF ONLY 7a OR 7b ARE SELECTED.

8. Will and Last Testament of the Decedent – skip to Section 9 if 7c was not selected.

a. Names and contact information of beneficiaries listed in decedent's will:

Name	Address	Phone Number

Attach additional sheets if necessary.

b. Did the will provide for a personal representative?: Yes No

c. Name and contact information for personal representative named in the will:

Name	Address	Phone Number

9. Exempt Estate

A non-trust estate having an appraised value which does not exceed five thousand dollars (\$5,000.00) and which is to be inherited by a surviving spouse and/or minor children of the deceased shall be exempt from the claims of all general creditors and the probate thereof may be summarily concluded.

a. Is the value of the non-trust estate less than \$5,000?: Yes No

b. Did the decedent have a surviving spouse or minor child?: Yes No

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10. General Description of the Decedent's Estate

Per Capita Trust Fund and/or Disbursement Amount	
Vehicles <i>(Brand, Model, Year)</i>	
Bank Accounts <i>(Bank Name & Account #)</i>	
Personal items <i>(clothes, furniture, décor, etc.)</i>	
House <i>Provide address</i>	
Ho-Chunk Finery & Artifacts <i>List the items.</i>	

Attach additional sheets if necessary.

11. Surviving Family Members - Names and addresses of decedent's surviving family:

Name	Address	Relationship to Decedent

Attach additional sheets if necessary.

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12. Are there any probate proceedings in another jurisdiction?: Yes No

If so, provide the name & address of the personal representative appointed in that proceeding and the name of the court:

13. I have attached the following legal documentation to support this petition:

- A copy of decedent’s tribal enrollment card.
- A copy of decedent’s death certificate.
- A copy of any land or house deed owned by the decedent if applicable.
- The original or a true copy of any will found or document alleged to be the last will and testament of the decedent if applicable.

*If no original of the will is available, state what efforts were made to obtain the original and any facts relating to its absence:

V. REQUESTED RELIEF

Appointment of a personal representative

a. Proposed Personal Representative Information

Name	Address	Phone Number

b. Statement of the proposed personal representative’s qualifications:

- Approval of decedent’s last will and testament.
- A finding that the decedent died without a valid will.
- Determination of heirs.
- Release of decedent’s per capita disbursement or trust fund.

NUMBER OF ADDITIONAL PAGES USED: _____

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By affixing my signature below, I swear that I provided the above information in good faith and with the belief that each statement represents a true and accurate account of the facts based upon adequate research and investigation. I recognize that the Ho-Chunk Nation Judiciary may impose sanctions if it determines that I made statements in bad faith, including intentional misstatements or statements made upon inadequate research or investigation. I also recognize that the foregoing admonition extends to include the omission of material facts or law, which I knew, or should reasonably have known, would impact or prove relevant to the action.

RESPECTFULLY SUBMITTED this _____ day of _____, 20____.

Petitioner's Printed Name: _____

Petitioner's Signature: _____

Name of Attorney/Lay Advocate (if any)

Signature of Attorney/Lay Advocate

Mailing address of legal counsel: _____

E-mail address of legal counsel: _____

Telephone number of legal counsel: _____

Facsimile number of legal counsel: _____

Ho-Chunk Bar Number of Counsel: _____

If the attorney/lay advocate is not a member of the Ho-Chunk bar: a *Motion to Appear Pro Hac Vice* has been attached in accordance with *Ho-Chunk Nation Rules of Civil Procedure*, Rule 16(B),1; and/or I have applied for membership in the Ho-Chunk bar in accordance with the *Ho-Chunk Nation Rules for Admission to Practice*.

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20____ at

City State

Notary Public for _____
State

My commission expires: _____