IN THE JUSTICE COURT, DEPARTMENT ONE, OF THE STATE OF MONTANA IN AND FOR THE

COUNTY OF BEAVERHEAD, BEFORE CANDY L. HOERNING, JUSTICE OF THE PEACE

2 S. PACIFIC ST. #16, DILLON, MT 59725 406-683-3755

* * * * * * * * * *

Enter Plaintiff's name(s)	)	
	)	Case No. CV _____ - _____
Plaintiff(s),	)	
-vs-	)	**CIVIL ANSWER**
Enter Defendant's name(s)	)	
	)	
Defendant(s).	)	

COMES NOW THE DEFENDANT and answers the complaint of the plaintiff as follows:

Enter a concise statement of your answer to the plaintiff's complaint,
It can be as broad as "I deny the allegations" or more elaborate.
If more space is needed, attach each additional sheet in triplicate.

WHEREFORE, defendant prays that plaintiff take nothing by way of his/her Complaint and that plaintiff shall pay all court costs.

DATED this ____ day of _____, 20____.

_____
Defendant(s) (signature)

_____
Please Print Name

_____
Defendant(s) address

_____
Phone number

I DO HEREBY CERTIFY that a true and correct copy of the foregoing Answer was mailed to the plaintiff at the address listed on the Complaint.

_____
Defendant

SAMPLE