IN THE JUSTICE COURT OF THE STATE OF MONTANA IN AND FOR THE COUNTY OF CARTER

BEFORE KATHLEEN "KATHY" ROSENCRANZ, JUSTICE OF THE PEACE 214 PARK STREET, EKALAKA, MT 59324

OFFICE 406-775-8754 FAX 406-775-8755

AllPlaintiffStart AllPlaintiffName			
<u>AllPlaintiffEnd</u>			
Plaintiff(s)	Case No. CaseNumber		
VS	COUNTERCLAIM		
AllCivilDefendantStart AllCivilDefendantName AllCivilDefendantEnd Defendant			
COME(S) NOW, the Defendant(s) and fo the Plaintiff(s) allege(s) as follows:	or his / her / their Counterclaim for relief against		
WHEREFORE, Defendant(s) request Counterclaim as follows:	(s) judgment against Plaintiff(s) on their		
DATED this day of	, 20		
Defendant(s) Signature(s)	Defendant(s) Attorney's Signature(s)		
Address	Address		
Phone No.	Phone No.		
CERTIFICATE	OF SERVICE		
I hereby certify that a true and correct of Plaintiff(s) or Plaintiff's(s') attorney(s) by placin thereon, addressed as follows:	copy of the Counterclaim was served upon the g the same in the U.S. mails, postage fully paid		
Plaintiff(s) / Attorney's Address	Defendant(s) / Attorney's Signature(s)		