
(your name)

(your street address)

(city, state, zip code)

(your phone number)

MONTANA _____ JUDICIAL DISTRICT COURT,
(number of district in which your county is located)
_____ COUNTY
(name of your county)

_____,) **Your Case No.** _____
)
Plaintiff,)
)
vs.) **AFFIDAVIT**
)
_____,)
)
Defendant.)

I, _____, swear (or affirm) under oath that: _____
(print your name)

