(your name	ne)			
(your ma	iling address)			
(city, stat	te, zip code)			
(your pho	one number)			
(E-mail)				
	Γ OF THE STATE OF MONTANA COUNTY OF MISSOULA,JUSTICE OF THE PEACE			
	) Case No.			
Plaintiff, vs.	) ) MOTION			
Defendant.				
The other party:  bojects				
does not object to my motion.				
I,(print your full name)	, respectfully request the Court Order			
the following:				
BECAUSE				

Dated this	day of	, 20	
		(Your signature)	
		(Print your name)	
		Certification of Service	
I,	, swear	(or affirm) under oath that I serv	red a copy of the attached motion
By: DUS	Mail	Hand-delivered.	
-			
on the	day of	,,	
DATED this	day of (date) (mo	onth) (year)	
	(Signature of	f person who served the motion)	(Print your full name)
Granted	Denied	ORDER	
You are ordered	l to appear on		·
Dated this	day of	, 20	
		Justice of t	the Peace