| (your name) | | |
|--------------------------|-------------------------|--|
| (your street address) | | |
| (city, state, zip code) | | |
| (your phone number) | | |
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| | | |
| MONTANA | I diamint in subject su | JUDICIAL DISTRICT COURT, our county is located) |
| (number o | | COUNTY |
| | (name of y | our county) |
| | | |
| | | Your Case No. |
| | _, | |
| | Plaintiff, |) |
| | , |) MOTION FOR |
| VS. | |) (name of your motion describing what you want the Court to do) |
| | ' | |
| | Defendant. | |
| I, | | _, respectfully request that the Court enter an Order |
| (print your full name) | | |
| that does the following: | | |
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| BECAUSE | | |
| DECAUSE | | |
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| 44-24 | | | - | | | | | | |
| *************************************** | | | | | | | | | |
| | | | | | | | | | |
| [| I | would lik | e a hearing | before the C | Court on t | his Motion | 1. | | |
| I | I have fi | led the fol | lowing doc | uments alon | g with th | is Motion: | | | , |
| . [| | My Affida | vit in suppo | ort of this Mo | otion. | | | | |
| [| | A proposed | d Order for | the Court's s | signature. | | | | |
| [| | My Affida | vit of Servi | ce, which inc | dicates ho | w I served | l copies of | these docur | nents |
| on the o | pposing | party. | | | | | | | |
| [| | Other: | N-7/24 | | | | | | |
| Ι | Dated th | is | day of | (month) | , 2 | 20 (year) | | | |
| | | | | (Your signature) |) | | · | | |
| | | | | (print your name | 2) | | | | |