Completing Form CAO 3-4: REPLY TO COUNTERCLAIM

[REMOVE THESE INSTRUCTIONS BEFORE FILING] Revised 7/1/2005

Talk to an attorney, if possible.

WARNING: When you represent yourself in a court case you are held to the same standard as an attorney. This applies to your preparation of paperwork and your conduct at all hearings and/or trial. Your lack of legal knowledge may cause you to make serious errors in handling your case. These instructions are not a substitute for legal advice. The laws and court rules are complex and following these instructions will not guarantee that your rights are protected or that you will be satisfied with the result. You should always talk to a lawyer about your legal problems before filing any legal paperwork. Even if you do not hire a lawyer to appear in your case, you may be able to find a lawyer to review your paperwork or give you more information about your rights. Call the Idaho State Bar (208-334-4500) to provide you with the name of an attorney who handles this type of case. Contact the Court Assistance Office for information about resources for low-income people.

INSTRUCTIONS

Fill in the forms by typing or by printing neatly and legibly in black ink. If you are working on a computer, you may delete the optional sections you don't need and renumber the remaining sections, or type in "none" if a section doesn't apply. The documents have a boldface "**or**" at the start of optional sections. If the section does not contain a boldface "**or**" it is necessary and you should type in the appropriate information (which might be the word "none"). Always keep a copy of the completed form for your records.

YOU WILL BE SIGNING AN OATH THAT YOU HAVE READ THE REPLY, KNOW THE CONTENTS AND BELIEVE THE CONTENTS TO BE TRUE. TO AVOID MAKING ANY MISSTATEMENTS, BE SURE TO READ THE ENTIRE FORM AND EVERY INSTRUCTION.

At the top left-hand corner of page 1, fill in your legal name, current mailing address and telephone number.

The Court Heading. Fill in the county and judicial district in the heading in capital letters (for example, "IN THE DISTRICT COURT OF THE <u>SIXTH</u> JUDICIAL DISTRICT IN AND FOR THE COUNTY OF <u>BANNOCK</u>") as they appear on the Complaint.

The Caption. Fill in your full legal name in the caption above "Plaintiff", and fill in your spouse's full legal name above "Defendant", exactly as they appear on the Complaint.

The Case No. Write in the case number shown on the Complaint. The Court Heading, Caption and Case Number will be the same on all documents you prepare for this case.

Review the Counterclaim carefully. You must admit or deny each paragraph in the Counterclaim individually. If you can only admit some of the facts in any paragraph, you must state specifically which facts you admit and which facts you deny.

Paragraph 1: Decide which specific numbered paragraphs of the counterclaim you completely agree with. Fill in those paragraph numbers, letters, or roman numerals, (as used in the counterclaim). If you can only admit some of the facts in any paragraph, you must state specifically which facts you admit.

Paragraph 2: Decide which specific paragraphs of the counterclaim you completely disagree with. Fill in those paragraph numbers, letters, or roman numerals, (as used in the counterclaim). If you only deny some of the facts in any paragraph, you must state specifically which facts you deny.

Paragraph 3: Decide which paragraphs of the counterclaim you have too little information or knowledge to evaluate. Fill in those paragraph numbers, letters, or roman numerals, (as used in the counterclaim).

There is a prayer portion of the Counterclaim that you do not have to specifically reply to. It usually starts with "Wherefore Defendant prays for judgment as follows:" You do not have to reply to any of the numbered paragraphs in the prayer of the Counterclaim.

Leave the spaces for the State and County blank. Locate a Notary Public who can watch you sign the Reply to Counterclaim. Sign the Reply to Counterclaim. Have the notary fill in the spaces and notarize your signature.

Certificate of Service:

- Fill in the name and address for the Defendant/Defendant's attorney exactly as it appears in the upper left corner of page one of the Counterclaim. If you are going to serve the Reply to Counterclaim by fax or personal delivery, write in the address you will use.
- Check the box to indicate how you are getting a copy to the Defendant/Defendant's attorney.
- Fill in the date and sign the Certificate of Service

NOTE: A copy of every document you file with the court must be sent to the other party, either directly or through the attorney if s/he has an attorney or record.

Make two copies.

Serve one copy to the person named in the upper left hand corner of Page 1 of the Counterclaim and in your Certificate of Service.

File your Reply to Counterclaim. Take the original (the one you signed) and your copy to the court clerk. The original will be kept in the court's file and you can ask that the clerk conform your copy. The clerk will conform your copy by stamping and dating it. This will save you paying \$1.00 per page for a copy of a filed document and will provide proof of the filing of the document. The clerk will hand your copy back to you.

REMEMBER TO REMOVE THESE INSTRUCTIONS BEFORE FILING YOUR REPLY

JUDICIAL DISTRICT
Case No REPLY TO COUNTERCLAIM Fee Category:
Filing Fee: \$
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1. I admit the following paragraphs of the Counterclaim (list each paragraph number):

2. I deny the following paragraphs of the Counterclaim (list each paragraph number):

3. I don't have sufficient knowledge or information to admit or deny the following paragraphs of the Counterclaim, and therefore deny it/them (list each paragraph number):

4. I deny all statements of the Counterclaim not specifically admitted in this Reply to Counterclaim.

VERIFICATION: I swear I have read this Reply to Counterclaim and state that all facts included are true.

DATE _____, 20___.

Signature of Plaintiff

SUBSCRIBED AND SWORN to before me this ______day of ______,

Notary Public for Idaho Residing at: ____ My Commission expires: _____

CERTIFICATE OF SERVICE

I certify I served a copy to: (name all parties or their attorneys in the case, other than yourself)

(Street or Post Office Address)

(City, State, and Zip Code)

(Name)

Signature

(Name)

(Street or Post Office Address)

(City, State, and Zip Code)

Date: _____

Typed/printed Name of Party Signing

[] By Mail

[] By fax

[] By Mail

[] By fax

[] By personal delivery

[] By personal delivery