

Madison County Justice Court
P.O. Box 277, Virginia City, MT 59755
Phone 406-843-4237 Fax 406-843-4219

JUSTICE COURT OF MADISON COUNTY, STATE OF MONTANA

_____	*	
_____	*	
_____	*	
Plaintiff	*	Cause No. _____
	*	
vs	*	PRAECIPE
	*	_____ *
_____	*	
_____	*	
Defendant	*	

TO: SHERIFF OF MADISON COUNTY or PRIVATE PROCESS SERVER

Please serve the attached original Summons and a copy of the Complaint on the following person(s).

Defendant(s) may be served at the following location:

Done and dated _____.

Plaintiff

Plaintiff's Mailing Address & Ph#

SHERIFF/PROCESS SERVER RETURN

I hereby certify that I served _____ on the _____ day
of, _____ 20____ at _____.

Dated _____.

Officer/Process Server