IN THE JUSTICE COURT OF THE STATE OF MONTANA
IN AND FOR THE COUNTY OF CARTER BEFORE
HON. KATHLEEN "KATHY" ROSENCRANZ, JUSTICE OF THE PEACE
214 PARK STREET, BOX 72, EKALAKA, MT 59324
Office # 406-775-8754 Fax # 406-775-8755
Email: CarterJusticeCourt@mt.gov

STATE OF MONTANA Plaintiff, Vs. Defendant.	**Case No:** TK 255- **DEFENDANT INFORMATION SHEET**

PLEASE **PRINT** THIS INFORMATION

First, M.I., Last Name: _____

Social Security No.: _____ Birth Date: _____

Mailing Address: _____

_____

Home Phone: _____ Cell Phone: _____

Physical Address: _____ X if same as Mailing

_____

_____

Email Address: _____

Employer Name and Address _____

_____

Attorney's Name: _____

Defendant Signature: _____ **Date:** _____.

(Return a copy to the court, prior your Court Hearing, along with copies of your photo I.D., Motion for video conference, Dangers of Self Representation signed and dated and the MCA Codes with your signature indicating that you have read these codes. You will then need to mail all documents with your original signature [in blue ink] to the Court after your Court Hearing)