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| Insert County District/Combined Court  Street Address  City, State. Zip Code  In the Appeal of:  Plaintiff/Petitioner: Enter Name(s),  &  Defendant/Respondent: Enter Name(s).  Filing Party: Your Name  Address: Street Address  City, State. Zip Code  Phone: Phone With Area Code  E-Mail: E-Mail address | ⮙ FOR COURT USE ⮙  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  District Court Case Number: \_\_\_\_\_\_\_\_\_\_\_  Courtroom: \_\_\_\_\_\_\_\_ |
| **Answer Brief** | |

Issues on Appeal

Statement of the Case

Argument

Conclusion

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Respectfully submitted,

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Name

Certificate of Service

I certify that on Date MM/DD/YYYY an original Answer Brief was filed with the District Court and that a copy was provided to the following parties:

Name of Counsel or Party if without Counsel

Served:  In-Person  By Mail

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List any other parties (or their attorneys if they have counsel), how they were served and their address.

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Name