Defendant or Defendant's Attorney		
Address, City, State	Mohave County Justice Courts, State of Arizona  ROM THE DROP DOWN ARROW AT RIGHT>>>  CASE NUMBER:    Name / Address / Phone   Defendant(s) Name / Address / Phone    ANSWER   Partnership     half of:   Marital Community   Other:     (Requires signature of both husband and wife)     ortion(s) of plaintiff's complaint:    ortion(s) of plaintiff's complaint:     ortion(s) of plaintiff's complaintiff's compl	
Plaintiff(s) Name / Addre	ess / Phone	Defendant(s) Name / Address / Phone
	ANSWER	
Lancard and the ball of	☐ Myself	☐ Partnership
I am answering on behalf of:		
I admit the following portion(s) of plain	Mohave County Justice Courts, State of Arizona  ECT A COURT FROM THE DROP DOWN ARROW AT RIGHT>>>  CASE NUMBER:  Plaintiff(s) Name / Address / Phone Defendant(s) Name / Address / Phone  ANSWER  ANSWER  Myself Partnership Marital Community Other: (Requires signature of both husband and wife)  mit the following portion(s) of plaintiff's complaint:  my the following portion(s) of plaintiff's complaint:  In asking the court to deny plaintiff's claim. I am also asking for reimbursement of my court costs. te under penalty of perjury that the foregoing is true and correct.  Defendant(s)  Defendant(s)  RTIFY that I have mailed / will mail a copy of this ANSWER on this same day to:  I plaintiff at the above address or Plaintiff's attorney	
	titt's sometime to	
	un s compiaint:	
	-	·
Date:	Defendant(a)	Defendant/a)
	perendant(s)	Derenaant(s)
I CERTIFY that I have mailed / will ma	ail a copy of this ANSWER	R on this same day to:
$\square$ Plaintiff at the above address	or	ney
Date:		

You are required to keep the court advised of your current address and telephone number. The clerk can provide you with a Notice of Change of Address form.

Revised: 9/21/2009