

\_\_\_\_\_  
Full Name of Party Filing Document

\_\_\_\_\_  
Mailing Address (Street or Post Office Box)

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email Address (if any)

IN THE DISTRICT COURT FOR THE \_\_\_\_\_ JUDICIAL DISTRICT  
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF \_\_\_\_\_

\_\_\_\_\_,  
Plaintiff,  
vs.  
\_\_\_\_\_,  
Defendant.

Case No. \_\_\_\_\_

REPLY TO COUNTERCLAIM

Plaintiff, for his/her Reply to the Counterclaim filed by Defendant, states:

1. I completely agree with and admit the following paragraphs of the Counterclaim (list each paragraph number):

\_\_\_\_\_  
\_\_\_\_\_

2. I admit the portion of paragraph \_\_\_\_ of the Counterclaim, that states: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ and I deny everything else in that paragraph of the Counterclaim.

3. I admit the portion of paragraph \_\_\_\_ of the Counterclaim, that states: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_ and I deny everything else in that paragraph of the Counterclaim.

4. I deny the following paragraphs of the Counterclaim because I do not have enough information to admit or deny them (list each paragraph number): \_\_\_\_\_

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5. I completely disagree with and deny everything I do not admit.

6.  I want the Complaint dismissed.

**CERTIFICATION UNDER PENALTY OF PERJURY**

I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

Date: \_\_\_\_\_

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Typed/printed

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Signature

CERTIFICATE OF SERVICE

I certify that on (date) \_\_\_\_\_ I served a copy to: (name all parties in the case other than yourself)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Street or Post Office Address)

\_\_\_\_\_  
(City, State, and Zip Code)

- By mail
- By fax (number) \_\_\_\_\_
- By personal delivery
- Overnight delivery/Fed Ex

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Street or Post Office Address)

\_\_\_\_\_  
(City, State, and Zip Code)

- By mail
- By fax (number) \_\_\_\_\_
- By personal delivery
- Overnight delivery/Fed Ex

\_\_\_\_\_  
Typed/printed name

\_\_\_\_\_  
Signature