

COMPLETING FORM CAO 3-2: ANSWER FOR TWO

[REMOVE THESE INSTRUCTIONS BEFORE FILING FORM CAO Cv 3-2]

WARNING: These instructions are not a substitute for legal advice. The laws and court rules are complex and following these instructions will not guarantee you a favorable result. We always recommend you talk to a lawyer about your problem before filing your paperwork. If you cannot afford to hire an attorney to represent you, you may be able to pay a lawyer to give you advice and review your paperwork for a lesser cost. Contact the Idaho State Bar Lawyer Referral Service (208-334-4500) for the name of an attorney in your area who will provide an initial half-hour consultation for \$35. Contact the Court Assistance Office for information about resources for low-income people, or visit the Idaho Supreme Court's Self-Help Center at <http://www.courtselfhelp.idaho.gov/> .

YOU WILL BE SIGNING A SWORN STATEMENT THAT YOU HAVE READ THE ANSWER, KNOW WHAT IT SAYS AND BELIEVE IT'S TRUE. TO AVOID MAKING ANY MISSTATEMENTS, BE SURE TO READ THE ENTIRE COMPLETED FORM AND EVERY INSTRUCTION.

You may be responding to (answering) a Complaint, Petition, Application, or a document with some other name. The procedure for responding is the same. To simplify these instructions, we will use the term "Complaint" in referring to the document you are answering.

If you want the judge to enter an order or judgment, but you disagree with what the person who filed the Complaint asked for, or you want other things not requested in the Complaint, you may need to file an Answer and Counterclaim; you will not use this form. As of this date, no forms for use as a civil counterclaim have been approved.

Fill in the forms by typing or by printing neatly and legibly in black ink. Always keep a copy of the completed form for your records.

At the top left-hand corner of Page 1, fill in your full legal name, mailing address and telephone number.

The Court Heading. Fill in the county and judicial district in the heading (for example, "In the District Court of the Fourth Judicial District in and for the County of Ada") as they appear on the Complaint that you were served.

The Caption. Fill in the names of Plaintiff(s) and Defendant(s) exactly as they are in the caption of the Complaint.

The Case No. Write in the same case number shown on the Complaint.

Note: The Court Heading, Caption and Case Number will be the same on all documents you prepare for this case.

Review the Complaint carefully. You must admit or deny each paragraph in the Complaint individually. If you can only admit some of the facts in any paragraph, you must state specifically which facts you admit and which facts you deny. See Paragraphs 4 and 5 on page 2 of the Answer.

After filling in your name in the first section, complete the next blank by filling in the name of the document you are answering.

Paragraph 1. Decide which specific numbered paragraphs of the complaint you completely agree with. Fill in those paragraph numbers, letters, or roman numerals (as used in the Complaint). If you can only admit some of the facts in any paragraph, you must state specifically which facts you admit. State the paragraph number, letter or roman numeral and list the facts you admit.

Paragraph 2. Decide which specific paragraphs of the complaint you completely disagree with. Fill in those paragraph numbers, letters, or roman numerals (as used in the Complaint). If you only deny some of the facts in any paragraph, you must state specifically which facts you deny. State the paragraph number, letter or roman numeral and list the facts you deny.

Paragraph 3. Decide which paragraphs of the complaint you have too little information or knowledge to evaluate. Fill in those paragraph numbers, letters, or roman numerals (as used in the Complaint). If the information is something you can easily find out, you should try to find out before you deny it.

Paragraph 6 is a general denial of any statements made in the Complaint that you did not specifically deny.

Paragraph 7 gives you the option of asking that the Complaint be dismissed. Check the box if that is what you want.

There is a prayer portion of the Complaint that you do not have to specifically answer. It usually starts with "Wherefore Plaintiff prays for judgment as follows:" You do not have to answer any of the numbered paragraphs in the prayer of the Complaint.

Affirmative Defense(s) Paragraph: Rule 8(c) I.R.C.P. lists the following affirmative defenses: accord and satisfaction, arbitration and award, assumption of risk, contributory or comparative negligence, discharge in bankruptcy, duress, estoppel, failure of consideration, fraud, illegality, injury by fellow servant, laches, license, payment, release, res judicata, statute of frauds, statute of limitations, waiver and any other matter constituting an avoidance or affirmative defense. You can use a legal dictionary to find out what the terms mean. You should talk to an attorney to determine

whether any of these affirmative defenses are available to you. Fill in those affirmative defenses that apply to your case, listing each in a separate paragraph.

Signature: Sign and date certifying that the information in the document is true and accurate, subject to the penalty perjury if it is not.

Certificate of Service:

- Fill in the address for the Defendant or the Defendant’s attorney exactly as it appears in the upper left corner of page one of the Complaint.
- Check the box to indicate how you are getting a copy to the other party or his/her attorney.
- Fill in the date and sign the Certificate of Service.

NOTE: Every document you file with the court in this case must contain a Certificate of Service and a copy must be sent to the other party or parties, if there are more than two parties to the case, either directly or through the attorney if s/he has an attorney.

Make the copies you need: one for yourself and one for each other party.

Serve the person(s) named in the upper left hand corner of Page 1 of the Complaint by the method specified in your Certificate of Service.

File your Answer. Take the original (the one you signed) and your copies (with the required filing fee) to the court clerk. The original will be kept in the court's file and you can ask that the clerk conform (stamp) your copy.

REMEMBER TO REMOVE THESE INSTRUCTIONS BEFORE FILING YOUR ANSWER

Full Name of Party Filing This Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone Number

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

_____ Plaintiff, vs. _____ Defendant.	Case No. _____ ANSWER Fee Category: _____ Filing Fee: \$ _____
---	---

(your name) _____, for his/her Answer to the
_____, states:

1. I admit the following paragraphs (list each paragraph number):

_____.

2. I deny the following paragraphs (list each paragraph number):

_____.

3. I deny the following paragraphs because I do not have enough information to admit or

deny them (list each paragraph number): _____

_____.

4. [] I deny the portion of paragraph _____, that states: _____

_____ and I admit the remaining portion of that paragraph.

5. [] I deny the portion of paragraph _____, that states: _____

_____ and I admit the remaining portion of that paragraph.

6. I deny everything I did not admit.

7. [] I want the Complaint dismissed.

AFFIRMATIVE DEFENSE(S)

(State each affirmative defense that applies in a separate paragraph - see I.R.C.P. 8(2))

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: _____

Typed/printed

Signature

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: _____

Typed/printed

Signature

CERTIFICATE OF SERVICE

I certify I served a copy to: (name all parties or their attorneys in the case, other than yourself)

(Name) By Mail

(Street or Post Office Address) By fax

(City, State, and Zip Code) By personal delivery

(Name) By Mail

(Street or Post Office Address) By fax

(City, State, and Zip Code) By personal delivery

Date: _____

Signature

Typed/printed Name of Party Signing