

Mark this box if this form contains Restricted Information.



CIRCUIT COURT FOR _____, MARYLAND

City/County

Located at _____

Court Address

Telephone _____

Case No. _____

vs.

Plaintiff _____

Defendant _____

Street Address _____

Street Address _____

City, State, Zip _____

Telephone _____

City, State, Zip _____

Telephone _____

**ANSWER TO COMPLAINT PETITION MOTION
(Md. Rule 2-323)**

If this submission contains Restricted Information (confidential by statute, rule or court order) you must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (form MDJ-008) with this submission, and check the Restricted Information box on this form.

I, _____, state the following answers to the
Name
_____ filed against me:

Name of complaint, petition, or motion

1. Paragraph No. 1 (**check one**):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 1.

2. Paragraph No. 2 (**check one**):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 2.

3. Paragraph No. 3 (**check one**):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 3.

4. Paragraph No. 4 (**check one**):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 4.

5. Paragraph No. 5 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 5.

6. Paragraph No. 6 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 6.

7. Paragraph No. 7 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 7.

8. Paragraph No. 8 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 8.

9. Paragraph No. 9 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 9.

10. Paragraph No. 10 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 10.

11. Paragraph No. 11 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 11.

12. Paragraph No. 12 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 12.

13. Paragraph No. 13 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 13.

14. Paragraph No. 14 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 14.

Case No. _____

15. Paragraph No. 15 (*check one*):

- I admit the statement(s).
- I deny the statement(s).
- I deny all of the statement(s), **except** that I admit that

_____ State the facts contained in this paragraph that you admit

- I do not have enough information to either admit or deny the statement(s).
- There is no paragraph no. 15.

16. In my defense to any of the statements made by the opposing party, I would like the court to consider the following facts: _____

FOR THESE REASONS, I request (*check all that apply*):

- Dismiss / Deny the complaint / petition / motion.
- Grant the relief requested in the complaint / petition / motion.
- Grant all of the relief requested in the complaint / petition / motion **except** dismiss / deny

_____ State the relief requested by the opposing party that you do NOT want the court to grant.

- Order any other appropriate relief.

_____ Date

Signature

AFFIDAVIT

I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

_____ Date

Signature

_____ Printed Name

_____ Telephone Number

_____ Street Address

_____ Fax

_____ City, State, Zip

_____ E-mail

CERTIFICATE OF SERVICE

I certify that I served a copy of this answer, and any attached documents, upon the following persons by mailing first class mail, postage prepaid hand delivery, on _____ to:

_____ Name

_____ Street Address

_____ Name

_____ Street Address

_____ Date

Signature of Party Serving