

IN THE 21ST DISTRICT COURT OF RAVALLI COUNTY, STATE OF MONTANA
BEFORE HONORABLE JUDGE TOWNSEND, MISSOULA COUNTY

* * * * *

Michael E. Spreadbury)
)
Plaintiff(s))
)
vs)
Dr. Bob Brophy)
)
Bitterroot Public Library)
)
Defendant(s))

SUMMONS

FOR AMENDED COMPLAINT
Case No.

DV-11-184
Hon. Karen S. Townsend Dept. 4

* * * * *

THE STATE OF MONTANA, TO THE ABOVE NAMED DEFENDANT(S), GREETING(S):

YOU ARE HEREBY SUMMONED to answer the Complaint in this action, which is filed in the above entitled Court. A copy of same is served upon you. You must file your written answer with the above entitled Court and serve a copy upon the Plaintiff(s), or Plaintiff('s)(s') attorney within twenty (20) days after the service of this Summons, exclusive of the day of service. FAILURE TO APPEAR AND ANSWER will allow judgment to be taken against you by default, for the relief demanded in the Complaint. A filing fee must accompany the answer at the time of filing.

and this th 5 day of April, 2011.



[Handwritten Signature]

DEBBIE HARMON, *clerk*
County Clerk, Ravalli County
by: *[Handwritten Signature]*

Plaintiff(s) Signature
PO Box 416
Hamilton, MT 59840-0416
Address
(406) 363-3877
Phone No.

[Handwritten Signature]
Plaintiff (Self Represented) Attorney Signature

STATE OF MONTANA)
 : ss.
COUNTY OF RAVALLI)

I HEREBY CERTIFY that I received the within Summons on the ___ day of _____, 20___, and personally served the same on the ___ day of _____, 20___, upon _____, in the County of RAVALLI. A copy of said Summons and Complaint, referred to in said Summons, was left with the Defendant(s).

DATED this ___ day of _____, 20___.

Sheriff / Deputy / Constable / Levying Officer

EXHIBIT B

IN THE 21ST DISTRICT COURT OF RAVALLI COUNTY, STATE OF MONTANA
BEFORE HONORABLE JUDGE TOWNSEND, MISSOULA COUNTY

Michael E. Spreadbury
Plaintiff(s)
vs
Mayor Jerry Steele
City of Hamilton
Defendant(s)

SUMMONS
FOR AMENDED COMPLAINT
Case No.
DV-11-184
Hon. Karen S. Townsend Dept. 4

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WITNESS my hand this 5th day of April, 2011.

[Signature]
Plaintiff(s) Signature
PO Box 416
Hamilton, MT 59840-0416
Address
(406) 363-3877
Phone No.

DEBBIE HARMON, *clerk*
[Signature]
by: [Signature]
Plaintiff (Self Represented) Attorney Signature

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COUNTY OF RAVALLI)

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DATED this ___ day of _____, 20___.

Sheriff / Deputy / Constable / Levying Officer

*Rand. Lake,
Mandan*