IN THE NEW PHILADELPHIA MUNICIPAL COURT TUSCARAWAS COUNTY, OHIO

Plaintiff	
)
Address)
City/State/Zip	
	ANSWER
Defendant(s)	_
Address	
)
City/State/Zip)
Phone E-mail	
	ANSWER
	Signature
	Date
I hereby certify that a true copy of this Answer	roof of Service was sent to all parties or counsel by (Check one): Personal Service orCertificate of Mail
	Date
	Signature