

**IN THE MAUMEE MUNICIPAL COURT**

400 Conant Street, Maumee, Ohio 43537

Phone: 419-897-7145 Fax: 419-897-7129

[www.maumee.org](http://www.maumee.org)

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

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State & Zip

\_\_\_\_\_  
Phone                      email

**RE: CASE CAPTION** \_\_\_\_\_

**\*\*ANSWER\*\***

**CERTIFICATE OF SERVICE**

I hereby certify that I mailed a copy of the above Answer to the Plaintiff/Plaintiff's Attorney,

\_\_\_\_\_  
Name of Plaintiff/Plaintiff's Attorney, Address, City, State and Zip

by regular U.S. mail on \_\_\_\_\_.

\_\_\_\_\_  
Defendant

\_\_\_\_\_  
Defendant