

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone Number

PETITIONER PRO SE

**MONTANA ELEVENTH JUDICIAL DISTRICT COURT, FLATHEAD COUNTY**

|  |  |
|--|--|
| <p>_____,<br/>Petitioner,</p> <p>-VS-</p> <p>STATE OF MONTANA,<br/>Respondent.</p> | <p>Cause No.: _____</p> <p>Judge: _____</p> <p>PETITION for RELIEF<br/>from REGISTRATION</p> |
|--|--|

COMES NOW, the Petitioner and for his/her claim for relief against the State of Montana, allege(s) as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHEREFORE, Petitioner requests relief as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature

**Certificate of Service**

I, \_\_\_\_\_, certify that I served a true and correct copy of the foregoing document entitled Petition for Relief from Registration by depositing into the US Mail on \_\_\_\_\_, 20\_\_\_\_ postage prepaid, and addressed to the following:

Flathead County Attorney  
920 So Main Street, Ste 201  
Kalispell MT 59901

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name