

**IN THE WATER COURT OF THE STATE OF MONTANA
UPPER MISSOURI RIVER DIVISION
MADISON RIVER - BASIN 41F
PRELIMINARY DECREE**

NOTICE OF INTENT TO APPEAR

1. Claim # _____
(ONE CLAIM NUMBER PER FORM – CLAIM NUMBER MUST BE LISTED ON THE 41F OBJECTION LIST)

2. Source _____

3. County _____

4. Name, Address, and Phone Number of Party Appearing:

Last Name First Name Middle Initial

Street Address or Post Office Box

City State Zip Code Phone/E-mail

5. Name, Address, and Phone Number of Party's Attorney, if any

Last Name First Name Middle Initial

Street Address or Post Office Box

City State Zip Code Phone/E-mail

(TURN FORM OVER AND COMPLETE BACKSIDE)

