

Plaintiff(s) Name/Address/Phone
V.

Defendant(s) Name/Address/Phone

CASE NUMBER _____
ANSWER
SMALL CLAIMS

1. The following named Defendant(s)

answers as follows:

2. I do not owe the Plaintiff(s) because:

Date: _____

Defendant

CERTIFICATE OF MAILING

I certify that I will mail a copy of the Answer to the opposing party(ies) at the address(es) listed.

Date: _____

Defendant