

CASE NUMBER _____
COUNTERCLAIM
SMALL CLAIMS

Plaintiff(s) Name/Address/Phone
V.

Defendant(s) Name/Address/Phone

1. The following named Defendant(s):

having filed an answer to plaintiff's complaint, now counterclaims against the following named plaintiff(s):

2. Plaintiff(s) owes Defendant(s) \$ _____ because (state the basis of the counterclaim):

Date: _____

Defendant/Counterclaimant

CERTIFICATE OF MAILING

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

Date: _____

Defendant/Counterclaimant