



**SMALL CLAIMS
COUNTER-CLAIM**

Case No. _____
Court District Small Claims
County _____

PLAINTIFF

Name: _____
Address: _____

VS.

DEFENDANT

Name: _____
Address: _____

1. Defendant claims Plaintiff:

2. Defendant claims the following sum from Plaintiff for damages brought about by the above Complaint:

\$ _____, (amount not to exceed \$2,500.00, exclusive of interest and costs) plus interest in the amount of \$ _____.

3. Defendant also claims court costs.

Date: _____, 2_____.

Defendant's Signature

Instructions: This counter-claim shall be filed with the Clerk and a copy delivered to the Plaintiff at least five (5) days prior to the time of the hearing.