

DEFENDANT'S ANSWER

Case Number _____

IN THE SMALL CLAIMS COURT OF _____, ALABAMA

(Name of County)

v.

Plaintiff

Defendant

Plaintiff's
Home Address

Defendant's
Home Address

Plaintiff's Attorney's
Address

Additional
Defendant(s)
and Addresses

PART 1. DEFENDANTS ANSWER TO THE COMPLAINT

Instructions:

1. Please print.
2. This answer must be signed by the person or persons who have been sued or their attorney. An answer which is not signed or which is not signed by the proper person cannot be considered.
3. Mail the original to the Small Claims Court Clerk at the address below.
4. Mail a copy to the plaintiff or his/her attorney, if he/she is represented by an attorney, at the address above.
Keep a copy for your files.

Notice: If you have been sued in county in which you do not live and if the suit against you is not for services or work and labor performed in the county where suit has been filed, you may request that it be transferred to your home county. If this applies, complete "A" below.

SELECT ONLY ONE OF THE FOLLOWING:

- A. I do not live in this county and the suit against me is not for work or labor performed in the county where suit has been filed; thus, I want this case transferred to my home county of _____.
- B. I admit everything in the Statement of Claim and do not want a trial. (This means that you consent to a judgment for the amount claimed plus court costs).
- C. I admit that I owe some money, but not the total amount claimed by the plaintiff(s). (If this block is checked, the case will be set for trial. Please note that any money paid by you on this claim after the suit was filed may not be reflected on the Statement of Claim which you receive. You should contact the person who has sued you or his/her attorney to determine the present balance which is claimed).
- D. I deny that I am responsible at all. (If this block is checked, this case will be set for trial).

IF YOU CHECKED "C" OR "D", BRIEFLY EXPLAIN THE REASONS FOR YOUR ANSWER.

Name, Address & Phone Number of Employer:

PART II. This answer must be signed by the person or persons who have been sued or their attorney. An answer which is not signed at all or which is not signed by the proper person cannot be considered. Keep a copy of this Answer and any other documents you receive concerning your case for your files.

CLERK'S ADDRESS:

Defendant or Defendant's Attorney (Signature)

Attorney Code

Defendant or Defendant's Attorney's Phone Number

Clerk's Phone No. _____

(See instructions on the Back)

Date of Filing