

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Representing Self or Lawyer for _____
Lawyer's Bar Number: _____

For Clerk's Use Only

YUMA JUSTICE COURT OF ARIZONA

250 W. 2nd Street Ste. A Yuma, AZ 85364

Phone: (928) 817-4100 Fax: (928) 817-4101

Case Number: _____

COUNTERCLAIM (CIVIL)

() _____

vs.

() _____

Plaintiff(s) Name / Address / Phone /
Email

Defendant(s) Name / Address / Phone /
Email

1. The following named Defendant(s): _____ having filed an Answer to Plaintiff's Complaint, now counterclaim(s) against the following named Plaintiff(s) _____ as follows.
2. If this claim is for recovery on an assigned debt, the original owner of the debt is: _____
3. This court has jurisdiction over this matter. If the amount requested exceeds the jurisdictional limit of the justice court, the case will be transferred to the Superior Court.
4. Venue in this precinct is proper because:
 The Defendant resides in this precinct, or
 A.R.S. § 22-202 permits me to file a lawsuit in this venue.
5. The Plaintiff(s) owe the Defendant(s) because: _____

(State the facts in support of your claim. You may attach an additional page to your complaint, if necessary.)

6. **The amount I am requesting can be calculated with certainty.** I am asking the court to award me judgment against Plaintiff(s) in the sum of \$ _____.

OR

The amount I am requesting cannot be calculated with certainty. I am asking the court to award me judgment against the Plaintiff(s) in the approximate sum of \$ _____.

Describe the damages: _____

7. I am also asking for reimbursement of the following:

<input type="checkbox"/> Attorney's fees	\$ _____
<input type="checkbox"/> Pre-judgment interest	\$ _____
<input type="checkbox"/> Post-judgment interest	\$ _____
<input type="checkbox"/> Court costs	\$ _____
<input type="checkbox"/> Other (specify): _____	\$ _____
Total: \$ _____	

8. I state under penalty of perjury that the foregoing is true and correct.

Date

Defendant(s) Signature

Defendant(s) Title

TO THE PLAINTIFF(S): You have 20 days to respond to this Counterclaim by filing a written Answer. If you fail to do so, a default judgment may be entered against you for the relief sought by the party filing the Counterclaim.

Please inform court staff if interpreter services are required.

YES, I need interpreter services. Language: _____

I CERTIFY that a copy of this document will be provided on _____ by:

hand-delivery first-class mail electronic means

Date

Defendant(s) Signature

Defendant(s) Title