

STATEMENT OF COUNTERCLAIM
Small Claims / Commercial Claims

INDEX NO.: _____

HEARING DATE: _____

DEFENDANT'S NAME (Please print): _____

(If a partnership, name each individual partner) _____

If defendant is doing business under a trade name, print trade name below:

DEFENDANT'S ADDRESS: _____

PLAINTIFF'S NAME (Please print): _____

ADDRESS: _____

COUNTERCLAIM (State amount, dates and details): _____

WITH INTEREST FROM: _____

The undersigned acknowledges that _____ he has been informed that _____ he shall be deemed to have waived all right to appeal except on the sole ground that substantial justice has not been done.

The undersigned has also been advised that supporting witnesses, account books, receipts and other documents required to establish the claim herein must be produce at the hearing.

The undersigned has been advised that if the within statement of counterclaim was not filed within five (5) days of receiving the notice of claim, the plaintiff may request an adjournment of the hearing to a later date. The plaintiff may reply to a counterclaim but shall not be required to do so.

DEFENDANT