



MARICOPA COUNTY JUSTICE COURTS

If you want to file a...

REPLY TO A CIVIL COUNTERCLAIM



MARICOPA COUNTY JUSTICE COURTS

A counterclaim is a claim made by the defendant against the plaintiff. If the defendant files a counterclaim, you (the plaintiff, counterdefendant) have **TWENTY (20) calendar days** from the date received in which to file a **Reply to Counterclaim**. There is no fee to file the Reply to Counterclaim.

There is no fee to file a counterclaim.

A DEFAULT JUDGMENT MAY BE ENTERED FOR FAILURE TO ANSWER THE COUNTERCLAIM

Please STOP...

If you have not received a counterclaim.

If your time to answer has expired and there has already been a judgment rendered.

Please PROCEED...

If you are within the time allowed for filing a Reply to Counterclaim.

FORMS Needed:

Reply to Counterclaim

INSTRUCTIONS:

- 1) Complete the form and make copies. The court will require an original and you may wish to keep a copy; additionally each named defendant will need a copy of your answer.
- 2) File (or mail) the original form with the court clerk
- 3) Mail copies to the defendant(s).

IT IS IMPORTANT THAT ALL PARTIES KEEP THE COURT APPRISED OF ANY CHANGE IN ADDRESS A NOTICE OF CHANGE OF ADDRESS form must be filed with the court when a party changes their address.

Visit us at <http://justicecourts.maricopa.gov/> for additional filing information and online forms.



Maricopa County Justice Courts, Arizona

CASE NUMBER: _____

Plaintiff(s) Name / Address / Email / Phone

Attorney for Plaintiff(s) Name / Address / Email / Phone

Defendant(s) Name / Address / Email / Phone

Attorney for Defendant(s) Name / Address / Email / Phone

REPLY TO COUNTERCLAIM JCRCP Rule 117

I am answering on behalf of: Myself Partnership
 Marital Community Other: _____
(Requires signature of both husband and wife)

I admit the following portion(s) of Counterclaimant / Defendant's counterclaim:

1. _____
2. _____
3. _____
4. _____

Counterclaimant / Defendant is not entitled to judgment on the counterclaim because:

1. _____
2. _____
3. _____
4. _____

I am asking the court to deny Counterclaimant / Defendant's counterclaim.
I am also asking for reimbursement of my court costs.

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

Date: _____ Counter-Defendant / Plaintiff Counter-Defendant / Plaintiff

Please inform court staff if interpreter services are required.
 Yes, I need interpreter services. Language: _____

I CERTIFY that a copy of this document has been or will be mailed on _____ to:
 Plaintiff at the above address Plaintiff's attorney Defendant at the above address Defendant's attorney
Date: _____ By _____
Signature