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R. O. No. 135 - 22 - 23. By CITY CLERK. April 5, 2023.

Submitting a Summons and Complaint - Small Claims in the matter of
Cristy Murray vs. City of Sheboygan c/o Mayor Ryan Sorenson et al.

FP

CITY CLERK

STATE OF WISCONSIN**CIRCUIT COURT****SHEBOYGAN**Cristy Murray vs. City of Sheboygan c/o Mayor Ryan
Sorenson et al**Electronic Filing
Notice**Case No. 2023SC000577
Class Code: Sm Claim, Claim Under \$ LimitFILED
03-27-2023
Sheboygan County
Clerk of Circuit Court
2023SC000577
Honorable Rebecca L.
Persick
Branch 4CITY OF SHEBOYGAN C/O MAYOR RYAN SORENSON
828 CENTER AVE #300
SHEBOYGAN WI 53081

Case number 2023SC000577 was electronically filed with/converted by the Sheboygan County Circuit Court office. The electronic filing system is designed to allow for fast, reliable exchange of documents in court cases.

Parties who register as electronic parties can file, receive and view documents online through the court electronic filing website. A document filed electronically has the same legal effect as a document filed by traditional means. Electronic parties are responsible for serving non-electronic parties by traditional means.

You may also register as an electronic party by following the instructions found at <http://efiling.wicourts.gov/> and may withdraw as an electronic party at any time. There is a \$20.00 fee to register as an electronic party. This fee may be waived if you file a Petition for Waiver of Fees and Costs Affidavit of Indigency (CV-410A) and the court finds you are indigent under §814.29, Wisconsin Statutes.

If you are not represented by an attorney and would like to register an electronic party, you will need to enter the following code on the eFiling website while opting in as an electronic party.

Pro Se opt-in code: 13109b

Unless you register as an electronic party, you will be served with traditional paper documents by other parties and by the court. You must file and serve traditional paper documents.

Registration is available to attorneys, self-represented individuals, and filing agents who are authorized under Wis. Stat. 799.06(2). A user must register as an individual, not as a law firm, agency, corporation, or other group. Non-attorney individuals representing the interests of a business, such as garnishees, must file by traditional means or through an attorney or filing agent. More information about who may participate in electronic filing is found on the court website.

If you have questions regarding this notice, please contact the Clerk of Circuit Court at 920-459-3070.

Sheboygan County Circuit Court
Date: March 27, 2023

FILED
03-27-2023
Sheboygan County
Clerk of Circuit Court
2023SC000577
Honorable Rebecca L.
Persick
Branch 4

DATE SIGNED: March 27, 2023

Electronically signed by Christine Koenig
Clerk of Court

STATE OF WISCONSIN

CIRCUIT COURT

SHEBOYGAN COUNTY

Amended

Cristy Murray vs. City of Sheboygan c/o Mayor Ryan
Sorenson et al

**Summons and
Complaint Small Claims**

Case No: 2023SC000577
Sm Claim, Claim Under \$ Limit 31001

Plaintiff:

Cristy Murray
1521 Kaufman Ave.
Sheboygan WI 53081

Defendant:

City of Sheboygan c/o Mayor Ryan Sorenson
828 Center Ave #300
Sheboygan WI 53081

Defendant:

Mark A Polich
2709 Pershing Ave.
Sheboygan WI 53083

This form does not replace the need for an interpreter, any colloquies mandated by law, or the responsibility of court and counsel to ensure that persons with limited English proficiency fully comprehend their rights and obligations.

If you require reasonable accommodations due to a disability to participate in the court process, please call 920-459-3070 at least 10 working days prior to the scheduled court date. Please note that the court does not provide transportation.

SUMMONS**To the Defendant(s):**

You are being sued as described on the attached complaint. If you wish to dispute this matter:

- You must appear at the time and place stated.
 You must file a written answer and provide a copy to the plaintiff or plaintiff's attorney on or before the date and time stated.

If you do not appear or answer, the plaintiff may win this case and a judgment entered for what the plaintiff is asking.

| When to Appear/File an Answer | |
|---|-----------------------------------|
| Date 04-24-2023 | Time 08:30 am |
| Place to Appear/File an Answer | |
| Sheboygan County Courthouse B-10 Lower Level 615 N 6th Street Sheboygan WI 53081 | |
| Date Summons Issued 03-27-2023 | Date Summons Mailed 03-27-2023 |

FILED
03-27-2023
Sheboygan County
Clerk of Circuit Court
2023SC000577
Honorable Rebecca L.
Persick
Branch 4

This form is also available in Spanish.
(Este formulario está disponible en español.)

STATE OF WISCONSIN, CIRCUIT COURT, SHEBOYGAN COUNTY

Plaintiff: [Name (First, Middle, Last), Address, City, State, Zip]

Cristy Murray
1521 Kaufman Ave.
Sheboygan, WI 53081

See attached for additional plaintiffs.

-vs-

Amended

To: Defendant(s): [Name (First, Middle, Last), Address, City, State, Zip]

CITY OF SHEBOYGAN
c/o Mayor Ryan Sorenson
828 Center Ave #300
Sheboygan, WI 53081
and
MARK A. POLICH
2709 Pershing Ave.
Sheboygan, WI 53083

See attached for additional defendants.

Summons and Complaint (Small Claims)

Case No. 23 SC

- Claim for money (\$10,000 or less) 31001
- Tort/Personal injury (\$5,000 or less) 31010
- Return of property (replevin) 31003
- Eviction 31004
- Eviction due to foreclosure 31002
- Arbitration award 31006
- Return of earnest money 31008

One or both parties require the services of an interpreter. Which party? _____
Which language? _____ Complete and file the Interpreter Request (GF-149) form.

If you require reasonable accommodations due to a disability to participate in the court process, please call _____
prior to the scheduled court date. Please note that the court does not provide transportation.

SUMMONS

To the Defendant(s):

You are being sued as described on the attached complaint. If you wish to dispute this matter:

- You must appear at the time and place stated.
- You must file a written answer and provide a copy to the plaintiff or plaintiff's attorney on or before the date and time stated.

If you do not appear or answer, the plaintiff may win this case and a judgment entered for what the plaintiff is asking.

| When to Appear/File an Answer | |
|---|---------------------|
| Date | Time 8:30 am |
| Place to Appear/File an Answer | |
| Sheboygan County Courthouse Court Room B 615 N 6th St. Sheboygan, WI 53081 | |
| Clerk/Attorney Signature | Date Summons Issued |
| | Date Summons Mailed |

FILED

03-27-2023

Sheboygan County

Clerk of Circuit Court

2023SC000577

Honorable Rebecca L.

Persick

Branch 4

COMPLAINT

Plaintiff's Demand:

The plaintiff states the following claim against the defendant(s):

1. Plaintiff demands judgment for *(Check as appropriate)*

- Claim for Money \$ 1,060.93
- Tort/Personal Injury \$ _____
- Return of property (replevin) *(Describe property in 2 below.) (Not to include Wis. Stats. 425.205 actions to recover collateral.)*
- Eviction
- Eviction due to foreclosure
- Return of Earnest Money
- Confirmation, vacation, modification or correction of arbitration award

Plus interest, costs, attorney fees, if any, and such other relief as the court deems proper

2. Brief statement of dates and facts:

(If this is an eviction action and you are seeking money damages, you must also state that claim on this form.)

On September 2nd, 2022 Cristy Murray's 2005 Ford Focus ("car") was parked in front of her home at 1521 Kaufman Ave., Sheboygan, WI. At approximately 11:00am Mark Polich, a City of Sheboygan employee, was performing his job duties, driving and picking up garbage cans with a City of Sheboygan garbage truck.

Mark lowered the arm of the truck to place a garbage can back on the ground, in front of 1521 Kaufman Ave., he then continued on towards the next garbage can. Unfortunately, Mark failed to raise the arm of the truck before doing so. The arm of the truck collided with the rear of the car, causing a large dent and paint scrape on the car's rear bumper, and breaking off part of the arm of the garbage truck.

Mark contacted the police, Officer Becker responded, and knocked on Ms. Murray's door to inform her of the incident. Officer Becker documented the crash, and Mark apologized to Ms. Murray saying: "I'm so sorry, the arm didn't come up".

Ms. Murray took the vehicle to Dean's Auto Body, Inc. where Joe Black inspected the vehicle and gave Ms. Murray an estimate of \$1,060.93 to repair the damage done by the garbage truck.

A copy of the Preliminary Estimate is attached as Exhibit A.

Ms. Murray submitted a claim to the City of Sheboygan, and was denied in full on March 14th, 2023.

A copy of the letter denying Ms. Murray's claim is attached as Exhibit B.

See attached for additional information. Provide copy of attachments for court and defendant(s).

I am the: plaintiff. attorney for the plaintiff.

▶ _____
 Plaintiff's Signature

Name Printed or Typed

Address

Email Address

Telephone Number _____ Date _____

Kyle Borkehagen

 Attorney's Signature

Kyle Borkehagen

 Attorney's Name Printed or Typed

909 N. 8th Street, Suite 100, Sheboygan, WI 53081

 Attorney's Address

kborkehagen@rohdedales.com (920) 458-5501

 Attorney's Email Address Attorney's Telephone Number

3/27/2023 1084544

 Date State Bar No

DEAN'S AUTO BODY, INC.Workfile ID:
PartsShare:018fa2f1
6Zz5VZ

Deans Has the Means for All Your Collision Needs!

1407 N 29TH ST, SHEBOYGAN, WI 53081

Phone: (920) 457-5494

FAX: (920) 457-6495

Preliminary Estimate**Customer: Murray, Cristy**

Written By: Joe Black

Insured: Murray, Cristy
Type of Loss:
Point of Impact: 07 Left RearPolicy #:
Date of Loss:Claim #:
Days to Repair: 0**Owner:**
Murray, Cristy
1521 Kaufmann Ave
Sheboygan, WI 53081
(920) 362-3664 Cell**Inspection Location:**
DEAN'S AUTO BODY, INC.
1407 N 29TH ST
SHEBOYGAN, WI 53081
Repair Facility
(920) 457-5494 Business**Insurance Company:****VEHICLE**

2005 FORD Focus SE ZX4 4D SED 4-2.0L Gasoline SMPI Blue

| | | | |
|------------------------|--------------------------|---------------------|--------------|
| VIN: 1FAFP34N35W209496 | Interior Color: | Mileage In: 162,906 | Vehicle Out: |
| License: ALB-8795 | Exterior Color: Blue | Mileage Out: | |
| State: WI | Production Date: 10/2004 | Condition: Poor | Job #: |

TRANSMISSIONOverdrive
5 Speed Transmission**POWER**Power Steering
Power Brakes
Power Windows
Power Locks
Power Mirrors**DECOR**Dual Mirrors
Tinted Glass
Console/Storage
Overhead Console**CONVENIENCE**Air Conditioning
Intermittent Wipers
Rear Defogger

Keyless Entry

RADIOAM Radio
FM Radio
Stereo
Search/Seek
CD Player**SAFETY**

Drivers Side Air Bag

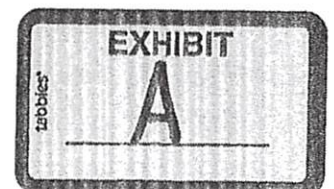
Passenger Air Bag

SEATSCloth Seats
Bucket Seats**WHEELS**

Wheel Covers

PAINT

Clear Coat Paint



Preliminary Estimate

Customer: Murray, Cristy

2005 FORD Focus SE ZX4 4D SED 4-2.0L Gasoline SMPI Blue

| Line | Oper | Description | Part Number | Qty | Extended Price \$ | Labor | Paint |
|------------------|------|--|--------------|-----|-------------------|------------|------------|
| 1 | | REAR BUMPER | | | | | |
| 2 | Repl | Bumper cover | 6S4Z17K835BA | 1 | 417.92 | 1.5 | 2.8 |
| | | Note: CCC Guide to Estimating G36 | | | | | |
| | | . Any Component clear coated as a separate procedure is not included. If the bumper cover requires a different clear coat mix because of flex additives, a separate procedure is required. - MOTOR, DEG Inquiry 5321 | | | | | |
| 3 | | Add for Clear Coat | | | | | 1.1 |
| 4 | | MISCELLANEOUS OPERATIONS | | | | | |
| 5 | # | Repl Administration Supplies | | 1 | 25.00 | | |
| 6 | # | Hazardous waste removal | | 1 | 6.00 T | | |
| 7 | # | Repl Flex additive | | 1 | 6.50 T | | |
| SUBTOTALS | | | | | 455.42 | 1.5 | 3.9 |

ESTIMATE TOTALS

| Category | Basis | Rate | Cost \$ |
|----------------------|---------------|--------------|-----------------|
| Parts | | | 442.92 |
| Body Labor | 1.5 hrs @ | \$ 68.00 /hr | 102.00 |
| Paint Labor | 3.9 hrs @ | \$ 68.00 /hr | 265.20 |
| Paint Supplies | 3.9 hrs @ | \$ 45.00 /hr | 175.50 |
| Body Supplies | 1.5 hrs @ | \$ 5.00 /hr | 7.50 |
| Miscellaneous | | | 12.50 |
| Subtotal | | | 1,005.62 |
| Sales Tax | \$ 1,005.62 @ | 5.5000 % | 55.31 |
| Grand Total | | | 1,060.93 |
| Deductible | | | 0.00 |
| CUSTOMER PAY | | | 0.00 |
| INSURANCE PAY | | | 1,060.93 |

MyPriceLink Estimate ID / Quote ID:

1009540312516796416 / 113073047

Preliminary Estimate

Customer: Murray, Cristy

2005 FORD Focus SE ZX4 4D SED 4-2.0L Gasoline SMPI Blue

As a family owned business, OUR MISSION, is to be your #1 collision repair facility. To provide you with outstanding customer care as we honestly and ethically repair your vehicle using environmentally friendly materials, the latest techniques, and up-to-date procedures. We will strive to grow our company with integrity to keep your business for life.

** All supplements must be addressed before the vehicle leaves. Any supplements left open will result in the vehicle not being delivered until the supplement is agreed upon with a copy in hand.

Per Wisconsin Statute 628.46 - any claim not paid within 30 days is subject to a 7.5% interest charge.

TOTAL LOSS ESTIMATES

Charges for total loss estimates with pictures and documentation to support estimate

Minimum of 4 hours at \$90 and going up from there depending what is all need to complete the written evaluation for a total loss.

Disassembly to gain access to document damage will be added on accordingly at the proper shop rate.

Scanning and measuring for diagnosing complete damage, will be billed out for each job accordingly at the proper shop rate.

Any OEM repair procedures needing a subscription to gather information for the repairs will also be added per vehicle according.

STORAGE CHARGES are \$50 per day

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS. ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911.

Preliminary Estimate**Customer: Murray, Cristy**

2005 FORD Focus SE ZX4 4D SED 4-2.0L Gasoline SMPI Blue

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide DE2JK00, CCC Data Date 09/16/2022, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2023 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Intelligent Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

Preliminary Estimate

Customer: Murray, Cristy

2005 FORD Focus SE ZX4 4D SED 4-2.0L Gasoline SMPI Blue

PARTS SUPPLIER LIST

| <u>Line</u> | <u>Supplier</u> | <u>Description</u> | <u>Price</u> |
|-------------|--|---|--------------|
| 2 | Broadway Ford Hyundai Genesis 1010 S Military Ave Green Bay WI 54304 | #6S4Z17K835BA Bumper cover Quote: 1338263642 Expires: 11/11/22 | \$ 417.92 |

Preliminary Estimate

Customer: Murray, Cristy

2005 FORD Focus SE ZX4 4D SED 4-2.0L Gasoline SMPI Blue

ALTERNATE PARTS USAGE

2005 FORD Focus SE ZX4 4D SED 4-2.0L Gasoline SMPI Blue

| | | | |
|------------------------|--------------------------|---------------------|--------------|
| VIN: 1FAFP34N35W209496 | Interior Color: | Mileage In: 162,906 | Vehicle Out: |
| License: ALB-8795 | Exterior Color: Blue | Mileage Out: | |
| State: WI | Production Date: 10/2004 | Condition: Poor | Job #: |

| Alternate Part Type | Selection Method | # Of Times Notified Of Available Parts | # Of Parts Selected |
|---------------------|--------------------|--|---------------------|
| Aftermarket | Automatically List | 0 | 0 |
| Optional OEM | Automatically List | 0 | 0 |
| Reconditioned | Automatically List | 0 | 0 |
| Recycled | N/A | 0 | 0 |

March 14, 2023

CERTIFIED & RESTRICTED MAIL

Cristy Murray
1521 Kaufmann Avenue
Sheboygan, WI 53081

Re: Your Claim Against the City of Sheboygan
Date of Loss: September 2, 2022

Dear Ms. Murray:

City of Sheboygan staff have reviewed and considered your claim filed on November 28, 2023, concerning damages you allegedly received, and denied it in full.

Please be advised that no lawsuit may be brought on this claim against the City of Sheboygan or any of its officials, officers, agents or employees after six (6) months from the date of receipt of this letter.

If you have any further questions on this claim, contact the City Attorney's office at 459-3917.

Sincerely,

[Handwritten Signature]
Charles C. Adams
CITY ATTORNEY

CCA/mmj

City Clerk Meredith DeBruin
Analyst Margo Wagner



To all litigants,

SUBSTANTIAL CHANGES were made to the Sheboygan County Small Claims rules in April, 2020. It is important that you follow the procedures below carefully. Court staff cannot make exceptions for individuals who do not follow the Small Claims procedures set forth below.

PLEASE NOTE: ALL PARTIES MUST READ “THE ABBREVIATED GUIDE TO SMALL CLAIMS” AVAILABLE ON THE SHEBOYGAN COUNTY OFFICIAL WEBSITE, sheboygancounty.com. THE DOCUMENT IS AVAILABLE ON THE PAGES OF BOTH THE CLERK OF COURTS OFFICE AND THE FAMILY COURT COMMISSIONERS OFFICE. If necessary, a paper copy of the Guide can be obtained in person from the Clerk of Courts office. Failure to read and follow all rules in the Guide and this letter may result in adverse consequences to parties failing to follow the applicable law and procedure.

Additional assistance can be found at <https://www.wicourts.gov/services/public/selfhelp/smallclaims.htm> .

THESE SPECIFIC LOCAL INSTRUCTIONS OVERRIDE ANY LANGUAGE REGARDING APPEARANCES ON THE COMPLAINT ITSELF, INCLUDING IN THE BOX MARKED “WHEN TO APPEAR/FILE AN ANSWER”. FOLLOW ONLY THE INSTRUCTIONS BELOW.

This letter will provide important information regarding the initial appearance in this matter. Information on the next steps in the process are in The Abbreviated Guide referenced above.

Initial appearances are conducted in writing only. **DO NOT COME TO THE COURTHOUSE IN PERSON ON THE RETURN DATE.** All answers are to be e-filed or submitted by mail only.

The **PLAINTIFF** does not need to file a letter of appearance, but Proofs of Service and non-military service must be filed with the Clerk of Courts office by noon on the Friday before the date of the scheduled initial appearance. The proof of Non-Military Service can be found at wicourts.gov, under Form, Circuit Court, General, Form GF-175. Submission through the e-filing system or by mail is strongly preferred.

If you are a **DEFENDANT**, you may answer one of two ways:

- You may submit your answer through the e-filing system or by mail. Defendants should receive a copy of the answer form with the complaint. If you do not have a form, it can be downloaded at wicourts.gov, under “Forms,” “Circuit Court,” “Small Claims”. Form SC5200V. Answers must be received by the Clerk of Courts Office by noon of the Friday before the scheduled initial appearance date. A copy also must be mailed to the plaintiff or his or her attorney at this time as well.

| | |
|---|---|
| Enter the name of the county in which you are filing this case. | STATE OF WISCONSIN, CIRCUIT COURT, SHEBOYGAN COUNTY |
| Enter the Plaintiff's name. The Plaintiff is the person bringing the lawsuit. | Plaintiff(s): _____ |
| Enter the Plaintiff's address. | First name Middle name Last name _____ Address _____ |
| If there is more than one plaintiff, check the "additional plaintiffs" box and attach another sheet with their names and addresses. | Address _____ |
| Enter the case number from the summons and complaint. | City State Zip <input type="checkbox"/> See attached for additional plaintiffs. |
| Enter your name. You are the Defendant. | -VS- Defendant(s): _____ |
| Enter your address. | First name Middle name Last name _____ Address _____ |
| If there is more than one defendant, check the "additional defendants" box and attach another sheet with their names and addresses. | Address _____ |
| | City State Zip <input type="checkbox"/> See attached for additional defendants. |

**Answer and Counterclaim
(Small Claims)**

Case No. _____

ANSWER

I am the defendant (or an authorized representative of the defendant):

| |
|--|
| Check 1 or 2. Check 1 if you do not dispute the plaintiff's claim. |
| Check 2 if you do dispute the plaintiff's claim. State the reasons why you disagree. |
| Check the box if you need more room and attach any additional pages. See <u>Pre-Judgment: Basic Steps to Small Claims Service</u> (SC-6050V). |

- 1. This matter **IS NOT** contested. I agree with the plaintiff's claim. Judgment may be taken as requested in the complaint, plus costs and interest as allowed by law.
-OR-
- 2. This matter **IS** contested. I do not agree with the plaintiff's claim. This matter should be scheduled so that the parties may present their evidence. The reason(s) why the matter is contested are as follows: **See attached** for additional information.

Counterclaim/Demand

Check the box if there is no counterclaim/demand and go to the signature section.

I/We do not have a counterclaim/demand against the plaintiff(s).

Check this box if there is a counterclaim/demand. Complete this section only if you are making a counterclaim/demand.

I/We have a counterclaim/demand against the plaintiff(s) and demand judgment against the plaintiff(s) for \$ _____, plus interest, costs, attorney fees, if any, and such other relief as the court deems proper.

Briefly explain why the court should award you what you are asking for.

If you are seeking to recover damages of more than \$5,000 for your tort or personal injury counterclaim, or more than \$10,000 for other types of counterclaims, the case may not continue in small claims court. In addition, you must pay a filing fee to the Clerk of Court, and you must send the *Notice of Counterclaim* (SC-5250V) to the plaintiff(s) on the same day the counterclaim is filed.

NOTE: Eviction actions are heard in small claims court, regardless of the amount of the counterclaim.

If you need more room, check the box and attach any additional pages to this Counterclaim.

Defendant(s) certify that a copy of this answer and counterclaim has been or will be mailed to the plaintiff(s) or plaintiff's attorney, if any.

Follow local rules for filing and serving.

Signatures

Sign and print your name. Enter the date on which you signed your name. **Note:** This signature does not need to be notarized.

▶ _____
Defendant's Signature

▶ _____
Attorney's Signature

Name Printed or Typed

Name Printed or Typed

Address

Law Firm and Address

Email Address

Email Address Telephone Number

Telephone Number Date

Date State Bar No. (if any)

If an attorney is completing this form, enter your information.