

STATE OF INDIANA )  
 ) SS:  
COUNTY OF MARION )

IN THE SMALL CLAIMS COURT OF  
\_\_\_\_\_ Township  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Counter-Claimant (Original Defendant name,  
address, phone),

Cause No. 49- \_\_\_\_\_ - \_\_\_\_\_ - SC- \_\_\_\_\_ .

vs.

**COUNTERCLAIM**

Counter-Defendant (Original Plaintiff name,  
address, phone).

The Defendant hereby files a Counterclaim against the Plaintiff. (This Counterclaim, and your original claim, will be heard on the same date, time and place as your original claim. The Court may enter a default judgment against you on the Counterclaim if you fail to appear.)

A brief statement of the nature of this Counterclaim against you is as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(Attach document(s) that support the above statement.)**

The Defendant requests judgment against the Plaintiff for \$ \_\_\_\_\_ , and court costs.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Attorney or Pro Se Party

**CERTIFICATE OF SERVICE**

I hereby certify that I served a copy of this Motion on \_\_\_/\_\_\_/\_\_\_ by placing a copy in the United States Mail, First Class, postage prepaid, addressed to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Attorney or Pro Se Party