

COUNTER CLAIM

Original Cause No. _____

COUNTER - PLAINTIFF: _____
VS
COUNTER - DEFENDANT: _____

IN THE JUSTICE COURT

**PCT 1
WOOD COUNTY, TX**

Counter - Defendant (1)(Name & Address)

Counter - Defendant (2) (Name & Address)

Phone No.: _____

Phone No.: _____

COMPLAINT: The basis for the claim which entitles the plaintiff to seek relief against the defendant is:

RELIEF: Plaintiff seeks damages in the amount of \$_____, and/or return of personal property as described as follows (be specific):_____ which has a value of \$_____.

Additionally, plaintiff seeks the following: _____

If you wish to give your consent for the answer and any other motions or pleadings to be sent to your email address, please check this box, and provide your valid email address: _____

Counter-Plaintiff Printed Name

Signature of Counter - Plaintiff or Attorney

Address of Counter - Plaintiff's Attorney (if any) or
Counter - Plaintiff

State

Zip

Phone # of Counter - Plaintiff's Attorney (if any) or
Counter - Plaintiff

Fax # of Counter - Plaintiff's Attorney (if any) or
Counter - Plaintiff

COUNTER - DEFENDANT'S INFORMATION (if known)

Date of Birth: _____

Last 3 numbers of Social Security: _____

Last 3 numbers of Driver's License: _____

