

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS)	TELEPHONE:	FOR COURT USE ONLY
ATTORNEY FOR (NAME):		
Insert name of court, judicial district or branch court, if any, and post office and street address:		
PLAINTIFF:		
DEFENDANT:		
ANSWER—Contract		CASE NUMBER:
<input type="checkbox"/> TO COMPLAINT OF <i>(name)</i> : <input type="checkbox"/> TO CROSS-COMPLAINT OF <i>(name)</i> :		

1. This pleading, including attachments and exhibits, consists of the following number of pages: _____

2. DEFENDANT *(name)*:

answers the complaint or cross-complaint as follows:

3. **Check ONLY ONE of the next two boxes:**

- a. Defendant generally denies each statement of the complaint or cross-complaint. *(Do not check this box if the verified complaint or cross-complaint demands more than \$1,000.)*
- b. Defendant admits that all of the statements of the complaint or cross-complaint are true EXCEPT:
 (1) Defendant claims the following statements are false *(use paragraph numbers or explain)*:

Continued on Attachment 3.b.(1).

(2) Defendant has no information or belief that the following statements are true, so defendant denies them *(use paragraph numbers or explain)*:

Continued on Attachment 3.b.(2)

(Continued)

If this form is used to answer a cross-complaint, plaintiff means cross-complainant and defendant means cross-defendant.

SHORT TITLE:

CASE NUMBER:

ANSWER—Contract

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4. AFFIRMATIVE DEFENSES

Defendant alleges the following additional reasons that plaintiff is not entitled to recover anything:

Continued on Attachment 4.

5. Other:

6. DEFENDANT PRAYS

- a. that plaintiff take nothing.
- b. for costs of suit.
- c. other (*specify*):

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[982.1(35)]

(Type or print name)

(Signature of party or attorney)

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