IN THE SANDY JUSTICE COURT
SALT LAKE COUNTY, STATE OF UTAH
10000 Centennial Parkway, Sandy, Utah 84070

_____, Plaintiff
Name

_____
Street Address

_____
City, State, ZIP Phone

VS.

_____, Defendant
Name

_____
Street Address

_____
City, State, ZIP Phone

AND

_____, Defendant
Name

_____
Street Address

_____
City, State, ZIP Phone

SMALL CLAIMS COUNTER AFFIDAVIT AND SUMMONS
(FORM E)

Case No._____

AFFIDAVIT

I swear that the following is true:

(1) Plaintiff owes me $ _____ for the claim described in paragraph (2).

plus the court filing fee of $ _____

plus an estimated service fee of $ _____

for a total of $ _____

plus prejudgment interest to the date of judgment, if qualified for prejudgment interest.

(2) This claim arose on: (Date)_____ for:(Facts that form the basis of the claim)_____
_____
_____
_____
_____.

Case No._____

_____
Defendant's or Agent's Signature

SUBSCRIBED and SWORN to before me on _____, 20 ___.

_____
Clerk's or Notary's Signature

SUMMONS

THE STATE OF UTAH TO THE PLAINTIFF: You are summoned to appear at a trial to answer the above claim.

[ ] The original trial date remains unchanged.

[ ] The original trial date has been changed to:

On: _____ At: _____ Court location: 10000 Centennial Parkway, Sandy, UT.
Date Time

If you fail to appear, judgment may be entered against you for the amount listed above.

I certify that I mailed a copy of this counter affidavit to plaintiff at the address on file with the court.

_____ _____
Date Clerk's Signature

ADA NOTICE: If you need special accommodations (including communication aids and services) during this proceeding you should call the Sandy Justice Court at 801-568-7160, at least three days before the proceeding.