

This is a Tier \_\_\_\_\_ case

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

**If you do not respond to this document within applicable time limits, judgment could be entered against you as requested.**

**Check your email.** You will receive information and documents at this email address.

I am  Defendant/Respondent  Defendant/Respondent's Attorney  
 Defendant/Respondent's Licensed Paralegal Practitioner (Utah Bar #: \_\_\_\_\_)

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

In the Matter of (select one)

- the Marriage of (for a divorce with or without children, annulment, separate maintenance, or temporary separation case)
- the Children of (to establish custody, parent-time or child support)
- the Parentage of the Children of (for a paternity case)

\_\_\_\_\_  
(name of Petitioner)

and

\_\_\_\_\_  
(name of Respondent)

\_\_\_\_\_  
Other parties (if any)

**Counterclaim**

\_\_\_\_\_  
Case Number

\_\_\_\_\_  
Judge

\_\_\_\_\_  
Commissioner (domestic cases)

**1. Claims**

I believe the plaintiff/petitioner has harmed me in these ways (Explain any claim you have against the plaintiff/petitioner. Attach additional sheets if needed.):

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

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**2. Request**

I want the court to (Explain what you want the court to do based on your claims. Be specific. For example, "I want the court to award damages of \$\_\_\_\_\_):

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**Plaintiff/Petitioner or Defendant/Respondent**

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at \_\_\_\_\_ (city, and state or country).

\_\_\_\_\_  
Date

Signature ► \_\_\_\_\_  
Printed Name \_\_\_\_\_

**Attorney or Licensed Paralegal Practitioner of record (if applicable)**

\_\_\_\_\_  
Date

Signature ► \_\_\_\_\_  
Printed Name \_\_\_\_\_

### Certificate of Service

I certify that I filed with the court and am serving a copy of this Counterclaim on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed/MyCase <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed/MyCase <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed/MyCase <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

\_\_\_\_\_

Date

Signature ► \_\_\_\_\_

Printed Name \_\_\_\_\_