

ANSWER - VERIFIED

SAMPLE

Use the samples to help you complete
the packet of blank forms.

Rev. 10/29/2025

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS):

TELEPHONE:

FOR COURT USE ONLY:

Your Name

Street Address

City, State and Zip Code

Phone Number

ATTORNEY FOR (NAME): **Self-Represented**

Insert name of court, judicial district or branch court, if any, and post office and street address:

Superior Court of California, County of Santa Clara**191 N. First Street****San Jose, CA 95113****Civil Division**

PLAINTIFF:

Person/Company who is suing you

DEFENDANT:

Your Name

ANSWER - Contract

☒ TO COMPLAINT OF (name): Person/Company who is suing you☐ TO CROSS-COMPLAINT (name):

CASE NUMBER:

Your Court Case Number

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

2. DEFENDANT (name): Your Name

answers the complaint or cross-complaint as follows:

3. Check ONLY ONE of the next two boxes:

a. ☐ Defendant generally denies the verified complaint.b. ☐ Defendant admits the truth of the verified complaint.

Check here, your type of case does not allow you to check box "a".

(1) Defendant claims the following statements are false (use paragraph numbers or explain):

Review the paperwork you were served and write the number of the paragraphs that you believe are not true. Example: 3b or BC-1

of attached pages (not including the proof of service)

☐ 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):

Review the paperwork you were served and write the number of the paragraphs that you are not sure are true. Example: 3b or BC-1☐ Continued on Attachment 3.b.(2).

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

Page 1 of 2

SHORT TITLE:

Plaintiff's Name v Your Name

CASE NUMBER:

Your Court Case Number

ANSWER-Contract4. ☐ AFFIRMATIVE DEFENSES

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

Read the attached affirmative defenses, if you see any that apply to your case, check boxes "4", "Continued on Attachment 4" and the box(es) on the attachment that apply to your case .

☐ Continued on Attachment 4.
5. ☐ Other:

If you would like to explain your side of the case, check box "5" and write your explanation here.

6. DEFENDANT PRAYS

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

Print your name

(Type or print name)

Sign your name

(Signature of party or attorney)

VERIFICATION
STATE OF CALIFORNIA, COUNTY OF SANTA CLARA

I have read the foregoing **ANSWER - CONTRACT**

and know its contents.

☒ **CHECK APPLICABLE PARAGRAPHS**

☒ I am a party to this action. The matters stated in the foregoing document are true of my own knowledge except as to those matters which are stated on information and belief, and as to those matters I believe them to be true.

☐ I am ☐ an Officer ☐ a partner
☐ a _____ of _____,

a party to this action, and am authorized to make this verification for and on its behalf, and I make this verification for that reason.

☐ I am informed and believe and on that ground allege that the matters stated in the foregoing document are true. ☐ The matters stated in the foregoing document are true of my own knowledge except as to those matters which are stated on information and belief, and as to those matters I believe them to be true.

☐ I am one of the attorneys for a party to this action. Such party is absent from the county of aforesaid where such attorneys have their offices, and I make this verification for and on behalf of that party for that reason. I am informed and believe and on that ground allege that the matters stated in the foregoing document are true.

Executed on **Today's date**, at **San Jose**, California.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Print your name

TYPE OR PRINT NAME

Sign your name

SIGNATURE

PROOF OF SERVICE

Revised 5/1/88

STATE OF CALIFORNIA, COUNTY OF

Santa Clara

I am employed in the county of _____, State of California.

I am over the age of 18 and not a party to _____ my business address is:

Santa Clara

Server's Address (person who mailed the forms)

On **Date forms were mailed**

ANSWER - CONTRACT

on **Plaintiff's Name** in this action

☐ by placing the true copies thereof enclosed in sealed envelopes addressed as stated on the attached mailing list:

☒ by placing ☐ the original ☒ a true copy thereof enclosed in sealed envelopes addressed as follows:

Plaintiff's Name and Address or Their Attorney's Name and Address, if they have one

☒ **BY MAIL**

☒ *I deposited such envelope in the mail at **City where Answer was mailed from**, California.

The envelope was mailed with postage thereon fully prepaid.

☐ As follows: I am "readily familiar" with the firm's practice of collection and processing correspondence for mailing. Under that practice it would be deposited with U.S. postal service on that same day with postage thereon fully prepaid at _____ California in the ordinary course of business. I am aware that on motion of the party served, service is presumed invalid if postal cancellation date or postage meter date is more than one day after date of deposit for mailing in affidavit.

Executed on **Date server signs** at **City where server signs**, California.

☐ **** (BY PERSONAL SERVICE)** I delivered such envelope by hand to the offices of the addressee.

Executed on _____ at _____, California.

☒ (State) I declare under penalty of perjury under the laws of the State of California that the above is true and correct.

☐ (Federal) I declare that I am employed in the office of a member of the bar of this court at whose direction the service was made

Server's Printed Name

Server's Signature

SIGNATURE

*(BY MAIL SIGNATURE MUST BE OF PERSON DEPOSITING ENVELOPE IN MAIL SLOT, BOX, OR BAG)

** (FOR PERSONAL SERVICE SIGNATURE MUST BE THAT OF MESSENGER)

Case Name: **Plaintiff's Name v. Your Name**

Case # : **Your Case Number**

Attachment 4 - AFFIRMATIVE DEFENSES

Check any box that applies to your case

☐ **Running of the Statute of Limitations**

Defendant alleges that each and every cause of action is barred by the applicable statute of limitations.

☐ **Identity Theft**

Defendant is a victim of identity theft and has no knowledge of this debt. Defendant has filed a police report for identity theft.

☐ **Special Rule for Credit Card**

Defendant alleges that Plaintiff is subject to all claims and defense that Defendant could assert against the merchant(s) who honored the credit card, pursuant to 15 USC §1666i.

☐ **Other Defenses** (See attached)

The plaintiff has a limited amount of time to sue you from the date the incident (they are suing you about) happened. Below are common time limits:

- | | |
|----------------------------|--|
| a. Personal Injury | 2 years from the injury or discovery (if injury in 2003 or later). |
| b. Oral Contract | 2 years from the date the contract is broken. |
| c. Written Contract | 4 years from the date the contract is broken. |
| d. Property Damage | 3 years from when the damage happened. |