

IN THE CIRCUIT COURT OF THE STATE OF OREGON
 FOR Douglas COUNTY
 Small Claims Division - 1036 SE Douglas Ave. Roseburg, OR 97470 (541) 957-2415
(court's address and phone number)

 Plaintiff

v.

 Defendant(s)

CASE No. _____

**NOTICE OF DEFENDANT'S
 ELECTION**

PART I. Claim Received. On *(date)* _____ I was served a notice of claim under ORS 46.445 where the above-named plaintiff made a claim against me in the above-named court:

- in the amount of: \$ _____
- for the following property: _____

PART II. Defendant's Election. *(Note: Each defendant listed above must sign and file a separate notice of defendant's election.)* I elect to respond under ORS 46.455 as follows:

1. ___ I ADMIT the plaintiff's claim. I will pay the money or return any property claimed, together with the filing fees and service expenses, directly to the plaintiff and mail proof of that delivery and payment to the court within 14 calendar days of the date the claim was served on me.

2. ___ I DENY the claim and demand a Small Claims hearing. Enclosed are court fees of \$ _____ (see Part III, below).

3. ___ I DENY the claim, demand a Small Claims hearing, and wish to file a COUNTERCLAIM arising out of the same transaction or occurrence that is the subject matter of the plaintiff's claim. Enclosed are court fees of \$ _____ (see Part III, below). I claim that the plaintiff owes me \$ _____ because:

4. ___ I DENY the claim and demand a JURY TRIAL. (Only if the claim exceeds \$750.00.) I enclose court fees of \$ _____ (see Part III, below). This choice requires the plaintiff to file a formal complaint in circuit court. If the plaintiff does not file a complaint, I ask that my JURY FEE be refunded to me. The plaintiff can mail a copy of the formal complaint to me at:

 Street/Apt. No. / PO Box No. City State Zip Code

PART III. Fees. I understand that:

Court fees required are based on the amount indicated in Part I, above, and may include other fees depending on how I respond in Part II, above. I must contact the court for the appropriate fee amount.
 If the appropriate fees are not enclosed, the form will not be accepted for filing and may result in a default judgment against me.

PART IV. Signature. I have read and understand the above. I have chosen one of the four alternatives and have enclosed the appropriate fee.

DATED: _____

SIGNED: _____

 Print Full Name

 Mailing Address

 City State Zip Code

 Phone No.