

IN THE MUNICIPAL COURT OF SIDNEY, OHIO

PLAINTIFF

CASE NUMBER _____

ADDRESS

CITY, STATE, ZIP CODE

PHONE NUMBER

VS.

DEFENDANT

ADDRESS

CITY, STATE, ZIP CODE

PHONE NUMBER

ANSWER

I HEREBY CERTIFY THAT A TRUE COPY OF THE FOREGOING WAS SENT TO ALL ENTITLED PARTIES BY:

Regular U.S. Mail Certified Mail Personal Service or Certificate of Mail (PLEASE CHECK ONE) on:

DATE: _____

Signature

Date Signed

Civil Answer Form Instructions

(NOT FOR USE WITH SMALL CLAIMS)

This form is to be filed with the court within 28 days of receiving the original summons in the mail. Fill in the blanks.

1. The caption stays the same as listed on the summons
2. Fill in the case number
3. Brief description as to why you are disputing the claim
4. Sign the form
5. Mail a copy to the court, a copy to the other party (if there is an attorney, mail to the attorney), and keep a copy for your records.