

**\*\*THIS IS NOT A SUBSTITUTE FOR THE ADVICE OF AN ATTORNEY\*\***

NOTICE: THIS DOCUMENT  
CONTAINS SENSITIVE DATA

**Cause Number** \_\_\_\_\_  
*(Complete the heading so that it looks exactly like the Petition)*

_____	§	In the: <i>(check one)</i>
Plaintiff <i>(Print Full Name)</i>	§	
	§	<input type="checkbox"/> _____ District Court
vs	§	
	§	<input type="checkbox"/> County Court at Law _____
_____	§	
Defendant <i>(Print Full Name)</i>	§	<input type="checkbox"/> Justice Court (JP) _____

**Defendant's Original Answer**

Defendant \_\_\_\_\_, files this original answer  
*(Name)*  
to the Plaintiff's petition, and would respectfully show unto the court the following:

Subject to stipulations and admissions made in the future, this Defendant asserts a general denial as is authorized by Rule 92 of the Texas Rules of Civil Procedure. Defendant respectfully requests that the Plaintiff be required to prove the charges and allegations against this Defendant by a preponderance of the evidence as is required by the Constitution and laws of the State of Texas.

The defendant respectfully prays that the Plaintiff take nothing; that this Defendant be allowed to recover the costs which have been incurred by reason of the charges and allegations of the Plaintiff against this Defendant; and that the court give this Defendant such other and further relief from these charges as the court may feel that this Defendant is entitled to.

Respectfully submitted,



\_\_\_\_\_  
*Your Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Your Printed Name*

\_\_\_\_\_  
*Phone*

\_\_\_\_\_  
*Mailing Address*

\_\_\_\_\_  
*City State Zip*

\_\_\_\_\_  
*Email Address*

\_\_\_\_\_  
*Fax # (if any)*

**Certificate of Service**

I certify that I delivered a copy of this document to each party in this case, or if a party is represented by a lawyer to the party's lawyer, by: *(Check one or more)*

Hand delivery to the other party \_\_\_\_\_

Hand delivery to the other party's lawyer \_\_\_\_\_


Email to this email address \_\_\_\_\_

Regular mail to this address: \_\_\_\_\_  
\_\_\_\_\_

Certified mail to this address: \_\_\_\_\_  
\_\_\_\_\_

Commercial delivery service (for example FedEx) to this address: \_\_\_\_\_  
\_\_\_\_\_

Fax to fax #: \_\_\_\_\_

 \_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*