UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

- against -

____Civ. ____ (___) (___)

ANSWER

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

I Admissions and Denials

In this section, state which factual allegations in the complaint you admit to and which factual allegations you deny. You should refer to the complaint paragraph by paragraph (and sentence by sentence within each paragraph), in the same order as the paragraphs and sentences appear in the complaint. Attach additional sheets of papers as necessary.

1.		
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6.	 	
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9.		
10.	 	

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DEFENSES

In this section, state any legal theories that, even assuming that what plaintiff has alleged in the complaint is true, do not permit the plaintiff to win the case. Attach additional sheets of paper as necessary.

FIRST DEFENSE:

SECOND DEFENSE:

THIRD DEFENSE:

WHEREFORE defendant asks this Court to dismiss the complaint and enter judgment in favor of defendant.

[If you have any counterclaim against the plaintiff that arises out of the same events or transactions stated in the complaint, and/or any crossclaims against the other defendants that arise out of the same events or transactions stated in this complaint, and/or any third-party claims you have against third-parties (that is, someone not already named in the lawsuit) that arise out of the same events or transactions stated in the complaint, you should attach additional sheets of paper to set forth the facts and bases for any such claims. <u>See</u> the Pro Se Manual for a further explanation.]

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

Signed this _	day of	, 20
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Signature	of Defendant
Address	
Telephone	• Number
Fax Numl	per (if you have one)

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

Dated: _____, ____

(town/city), (state)

_____, 20____

Signature of Defendant

Address

City, State & Zip Code

Telephone Number

Fax Number (if you have one)