

DO NOT WRITE IN THIS SPACE

GEORGIA
FULTON COUNTY

STATE COURT OF FULTON COUNTY
(Civil Division)

(Plaintiff's Name and Address)
vs.

(Defendant's Name and Address)

SUMMONS

TYPE OF SUIT		AMOUNT OF SUIT	
☐	Account	Principal	\$ _____
☐	Contract		
☐	Note	Interest	\$ _____
☐	Tort		
☐	Trover	Atty. Fees	\$ _____
☐	Special Lien		
☐	Foreign Judgment	Ct. Costs	\$ _____
☐	Personal Injury		

TO THE ABOVE NAMED-DEFENDANT:

You are hereby required to file with the Clerk of said court and to serve a copy on the Plaintiff's Attorney, or on Plaintiff if no Attorney, to-wit:

(Name)

(Address)

(Phone No.)

☐ NEW FILING

☐ REFILING

PREVIOUS CASE NO. _____

an answer to the complaint which is herewith served on you, within (30) days after service on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint, plus cost of this action.

This _____

Deputy Clerk

WRITE VERDICT HERE

We, the jury, find for _____

This _____ day of _____, 20____.

Foreperson

(Staple to front of ORIGINAL complaint)