

SMALL CLAIMS COVER SHEET

CASE # _____

PLAINTIFF INFORMATION

FULL NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DRIVERS LIC#/ SS # _____ PHONE _____ DOB _____

EMAIL _____

DEFENDANT INFORMATION

FULL NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DRIVERS LIC#/ SS # _____ PHONE _____ DOB _____

EMAIL _____

ATTORNEY INFORMATION

NAME _____ BAR # _____

ADDRESS _____ CITY _____ STATE _____

PHONE _____ EMAIL _____

SUMMONS INFORMATION

NUMBER OF SUMMONS TO BE ISSUED _____

PROCESS SERVER _____ PUBLICATION _____ SHERIFF _____ REGISTERED MAIL _____

CLAIMS FOR RELIEF REQUESTED

INDEBTEDNESS

___ UNDER \$1500

___ OVER \$1500 TO \$6000

FORCIBLE ENTRY & DETAINER

___ UNDER \$1500

___ OVER \$1500 TO \$6000

REPLEVIN

___ UNDER \$1500

___ OVER \$1500 TO \$6000