

FRANKLIN COUNTY MUNICIPAL COURT
SMALL CLAIMS DIVISION

Case No. _____ CV I _____

Plaintiff(s) Name, Address, ZIP Code, and Telephone Numbers

Defendant(s) Name, Address, ZIP Code, and Telephone Numbers

- (1) Has this dispute been to mediation? [] Yes [] No
- (2) Is the Defendant currently in the United States Military Service? [] Yes [] No
- (3) The Summons (Defendant's Notice of the Complaint) will be sent by certified mail. If you waive notice of failed service and the certified mail is returned as "Refused" or "Unclaimed," the Court will resend by ordinary mail and set a new trial date. Do you want to waive notice of failed service? [] Yes [] No

COMPLAINT

Please use an additional page if necessary.

Plaintiff demands judgment against Defendant in the sum of \$ _____, plus court costs and interest.

COMPLAINANT'S OATH

_____ (print first and last name), is
(check one) [] Plaintiff [] Plaintiff's attorney [] an officer or salaried employee of the Plaintiff corporation. Complainant also states the following:

"I declare under penalty of law that this Complaint is true and correct to the best of my knowledge."

Do you need an interpreter? Select language.

- español (Spanish)
- العربية (Arabic)
- 普通话 (Mandarin)
- русский (Russian)
- Sign Language
- Français (French)
- Soomaali (Somali)
- खस भाषा (Nepali)
- አማርኛ (Amharic)
- Tigrigna (Tigrinya)
- Other _____

Signature: _____ Date: _____

Plaintiff, Plaintiff's attorney, or Plaintiff's officer or salaried employee.

Attorney Registration #: _____