

Small Claim Affidavit Form

STATE OF [STATE NAME]

COUNTY OF [COUNTY NAME]

AFFIDAVIT IN SUPPORT OF SMALL CLAIM

I, [Your Full Name], residing at [Your Address], being duly sworn, depose and say:

1. Plaintiff Information:

- Full Name: _____
- Address: _____
- City, State, ZIP Code: _____
- Phone Number: _____

2. Defendant Information:

- Full Name: _____
- Address: _____
- City, State, ZIP Code: _____
- Phone Number: _____

3. Claim Information:

- The defendant owes me \$ _____ due to:
 - Unpaid Loan
 - Property Damage
 - Breach of Contract
 - Unpaid Wages
 - Other: _____

4. Details of Claim:

- Date the issue arose: [MM/DD/YYYY]
- Description of incident:

5. Supporting Evidence (Check all that apply):

- Written Agreement**
- Emails or Text Messages**
- Witness Statements**
- Invoices or Receipts**

6. Amount Claimed:

- **Amount Due: \$_____**
- **Court Filing Fees: \$_____**
- **Total Requested: \$_____**

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

Plaintiff's Signature: _____ Date: _____

Sworn to and subscribed before me this _____ day of [Month, Year].

Notary Public Signature: _____

My Commission Expires: _____