Small Claim Form SC-100

PLAINTIFF'S CLAIM AND ORDER TO GO TO SMALL CLAIMS COURT

PAR1	TIES				
Plain	tiff:				
•	Name:				
•	Address:				
•	Phone:				
Defendant:					
•	Name:				
•	Address:				
•	Phone:				

CLAIM INFORMATION

Claim Type	Description	Amount	Date of Incident
Unpaid Rent	[Description]	\$	[MM/DD/YYYY]
Damage	[Description]	\$	[MM/DD/YYYY]
Breach of Contract	[Description]	\$	[MM/DD/YYYY]
Other	[Description]	\$	[MM/DD/YYYY]

REQUESTED RELIEF

□ Payment of Claim Amount	
□ Legal Fees Reimbursement	
\square Additional Compensation	
Plaintiff's Signature:	
Date [.]	