

**OAKWOOD MUNICIPAL COURT, MONTGOMERY COUNTY,
OHIO SMALL CLAIMS DIVISION
30 PARK AVENUE
OAKWOOD, OH 45419
(937)293-3058**

CASE NO: _____

Plaintiff Name

Address

City, State, Zip

Phone No.

vs

#1 Defendant Name

Address

City, State, Zip

Phone No.

#2 Defendant Name

Address

City, State, Zip

Phone No.

TO THE CLERK:

Please take notice that a claim is hereby filed against the above defendant(s) and request that she/he/they be summoned to appear in the Court to answer same.

STATEMENT OF CLAIM

_____ Account – Exhibit A attached and made a part hereof _____ Wages _____

_____ Other _____

Wherefore plaintiff prays judgment against defendant in the sum of \$ _____, plus interest from the _____ day of _____, 20____, at the rate of _____% and costs.

State of Ohio }
County of Montgomery }

ss. **AFFIDAVIT OF COMPLAINANT’S CLAIM**

_____, being first duly sworn, on oath states that she/he/they is the Plaintiff in the above entitled cause; that the said cause is for payment of money that the nature of the plaintiff’s demand is as stated, and that there is due to plaintiff from the defendant(s) the amount stated above; defendant(s) is/are not now in the military or naval service of the United States.

Signature of Plaintiff/Attorney

Subscribed to and sworn before me this _____ day of _____, 20_____.

Clerk/Deputy Clerk/Notary Public

***Affidavit must be signed in the witness of a Notary or Clerk/Deputy Clerk.**

SMALL CLAIMS INFORMATION SHEET

DATE: _____

PLAINTIFF(S)

NAME

ADDRESS

CITY, STATE, ZIP

PHONE NO.

DEFENDANT(S)

NAME

ADDRESS

CITY, STATE, ZIP

PHONE NO.

Is DEFENDANT(S) presently in the military? _____ Yes _____ No

Nature of Complaint:

Amount claimed \$ _____, with interest at _____%, from the _____ day of _____, 20 _____.

This Complaint is true to the best of my knowledge.

Plaintiff(s) Signature