

****SAMPLE****

FRANKLIN MUNICIPAL COURT

1 BENJAMIN FRANKLIN WAY, FRANKLIN, OHIO 45005
(937)746-2858

SMALL CLAIM COMPLAINT AND AFFIDAVIT

YOUR NAME

AND ADDRESS

Phone ###-###-####

PLAINTIFF

CASE # _____

VS

NAME AND ADDRESS OF WHO YOU

ARE TRYING TO COLLECT FROM.

Phone ###-###-####

DEFENDANT

Plaintiff claims the sum of \$ **AMOUNT YOU ARE SEEKING** (\$ _____) Is owed from Defendant

_____ on an **ACCOUNT** (shown in Exhibit "a" attached and made part hereof, _____ For **WAGES**

_____ **OTHER** WHAT/WHY _____

WHEREFORE, Plaintiff prays for judgment against Defendant in the sum of \$ DOLLAR AMOUNT *plus court cost* and interest from _____ day of DATE OF AGREEMENT, 20____ Plaintiff further states that the Defendant is not in the military or naval service of the United States.

AFFIDAVIT OF PLAINTIFFS CLAIM

YOUR NAME, being first cautioned and duly sworn, states that the information contained on this Small Claim Complaint is true and accurate to the best of my knowledge and belief.

Signed this _____ day of _____ 20____

PLAINTIFF SIGNATURE

Subscribed and sworn before me this _____ day of _____ 20____

Clerk, Deputy Clerk, Notary

NOTICE AND SUMMONS IN ACTION FOR MONEY ONLY

Defendant:_____ You are hereby notified that you are required to appear in the Franklin Municipal Court at 1 Benjamin Franklin Way Franklin, Ohio 45005 on Wednesday the _____ day of _____ 20____ at 10:00 AM.