

Name[s] _____
Address _____
Town _____ State _____ Zip Code _____
() _____
Telephone Number _____

PLAINTIFF(S)

Name[s] _____
Address _____
Town _____ State _____ Zip Code _____
() _____
Telephone Number _____

DEFENDANT(S)

IN THE
LAGRANGE SUPERIOR COURT
105 N. Detroit Street
LaGrange, Indiana 46761
Court Phone: (260) 499-6363
Claims Clerk: (260) 499-6375

SMALL CLAIM

Cause No: 44D01- _____

NOTICE OF CLAIM

Service By: ☐ Certified Mail ☐ Sheriff ☐ Private Process
☐ Account ☐ Promissory Note ☐ Bad Check ☐ Eviction ☐ Wages ☐ Other

This claim is set for pre-trial hearing on _____, at _____ am
in the LaGrange Superior Court, Courthouse, LaGrange, Indiana 46761.

A brief statement of the nature of the claim against you is as follows: _____

Plaintiff(s) therefore seek(s) judgment against you in the amount of \$ _____, plus court costs
of \$ _____, for a total of \$ _____.

This is an attempt to collect a debt, and any information obtained will be used for that purpose.

Date: _____

Signature of Plaintiff

Signature of Plaintiff

SHERIFF'S RETURN OF SERVICE

I hereby certify that I have (not) served this Notice of Claim: (check and complete applicable method or reason.)

1. By delivering a copy of this Notice of Claim to Defendant(s) _____
_____ personally on _____ (date).
2. By leaving a copy of this Notice of Claim at Defendant's(s') dwelling house or
usual place of abode, and by sending a copy of this Notice of Claim by first-
class mail to said Defendant(s) at his/her/their/its last known address,
_____ (address) on _____ (date).
3. Because Defendant(s) was (were) not found in my bailiwick and/or does
(do) not have a dwelling house or usual place of abode therein.

CERTIFICATE OF MAILING

I hereby certify, as indicated in the date
issued field, that a copy of this Notice of
Claim was sent to the named person(s) at
the address(es) furnished, by registered/
certified mail at LaGrange, Indiana, return
receipt requested.

Clerk of LaGrange Superior & Circuit Courts

Date Issued: _____

_____ County, IN _____ Sheriff

Affidavit of Debt Form:

AFFIDAVIT OF DEBT

Comes now Affiant, and states:

I, _____ am

☐

Plaintiff

OR

☐

a designated full-time employee of

(Plaintiff)

I am of adult age and am fully authorized by Plaintiff to make the following representations. I am familiar with the record keeping practices of Plaintiff. The following representations are true according to documents kept in the normal course of Plaintiff's business and/or my personal knowledge:

Plaintiff:

☐

is the owner of this debt.

OR

☐

has obtained this debt from _____ and the original owner of this debt was: _____.

Defendant, _____, has an unpaid balance of \$ _____
_____ on account : _____. (last 4 digits of number or ID only)

That amount is due and owing to Plaintiff. This account was opened on _____
_____. The last payment from Defendant was received on _____
_____ in the amount of \$ _____. The type of account is:

☐

Credit card account (i.e. Visa, Mastercard, Department Store, etc.) List the name of the company/store issuing credit card: _____.

☐

Account for utilities (i.e. telephone, electric, sewer, etc.)

☐

Medical bill account (i.e. doctor, dentist, hospital, etc.)

☐

Account for services (i.e. attorney fees, mechanic fees, etc.)

☐

Judgment issued by a court (a copy of the judgment is required to

be attached)

☐

Other: (Please explain) _____

This account balance includes:

☐ Late fees in the amount of \$ _____ as of _____

(Month, Day, Year)

☐ Other: (Explain) _____

☐ Interest at a rate of _____% beginning on _____

(Month, Day, Year)

Plaintiff:

☐ is seeking attorney's fees and additional evidence will be presented to the court prior to entry of judgment on attorney's fees.

OR

☐ is not seeking attorney's fees.

Plaintiff believes that Defendant is not a minor or an incompetent individual.

If the Defendant is an individual, Plaintiff states and declares that:

☐ Defendant is not on active military service. Plaintiff's statement that Defendant is not on active military service is based upon the following facts: _____

OR

☐ Plaintiff is unable to determine whether or not Defendant is on active military service.

("Active military service" includes full-time duty in the military (including the National Guard and reserves) and, for members of the National Guard, service under a call to active service authorized by the President or Secretary of Defense. For further information, see the definition of "military service" in the Servicemembers Civil Relief Act, as amended, 50 U.S.C.A. Appx. § 521.)

I swear or affirm under the penalties of perjury that the foregoing representations are true.

Dated: _____

Signature of Affiant: _____