

DECATUR SUPERIOR COURT – SMALL CLAIMS DIVISION

TYPE OF SMALL CLAIM: [ ] ORIGINAL FILING [ ] ALIAS [ ] COUNTERCLAIM

CLERK, DECATUR SUPERIOR COURT
150 Courthouse Square, Suite 244
Greensburg, Indiana 47230
(812)663-8642

CAUSE NO. 16D01-\_\_\_\_\_-SC-\_\_\_\_\_
Service by: [ ] Certified Mail
[ ] Sheriff of \_\_\_\_\_ County

Fill in box completely:

SERVE TO:

Form with fields for Plaintiff's Name, Defendant's Name, Street and Number, City, State, Zip, and Telephone Number.

NOTICE OF CLAIM TO DEFENDANT

You (the Defendant) have been sued by the Plaintiff whose name appears above. This claim has been scheduled for trial on Tuesday, the \_\_\_\_ day of \_\_\_\_\_, 201\_\_ at \_\_\_\_ A.M. in the Decatur Superior Courtroom located on the second floor of the Courthouse at 150 Courthouse Square, Suite 216, Greensburg, Indiana 47240.

The Plaintiff's claim is for: [ ] Note, Contract, or Account (copy must be attached) [ ] Rent [ ] Wages [ ] Other (specify) \_\_\_\_\_.

A brief statement of the Plaintiff's claim against you is as follows:
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

The Plaintiff demands judgment against the Defendant for \$\_\_\_\_\_, plus interest from \_\_\_\_\_, 20\_\_\_\_, at the rate of \_\_\_\_\_%, and the court costs of this action.

Plaintiff's Signature \_\_\_\_\_ Date \_\_\_\_\_

IMPORTANT INFORMATION CONCERNING THIS CLAIM

- 1. You may appear at the trial either in person or by an attorney. You should bring to the trial all documents in your possession or under your control concerning this claim.
2. If you are unable to appear at the time or place designated in this notice, you may contact the Court Reporter for the Decatur Superior Court, 150 Courthouse Square, Suite 219, Greensburg, Indiana 47240, (812) 663-8523, between the hours of 8:00 a.m. and 4:00 p.m., Monday through Friday.
3. A Defendant has the right to a trial by jury but must make a written request within ten (10) days of receipt of this Notice of Claim.
4. A copy of small claims manual provided as required by Small Claims Rule 13 is available upon your request at the Office of the Clerk of this Court.

**CERTIFICATE OF MAILING**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, I mailed a copy of this notice to each of the defendant(s) \_\_\_\_\_ by certified mail requesting a return receipt addressed to each of said defendant(s) \_\_\_\_\_ at the address(es) furnished by the plaintiff.

DATED: \_\_\_\_\_

\_\_\_\_\_  
Clerk, Decatur Superior Court

**RETURN OF SERVICE OF NOTICE OF MAIL**

I hereby certify that service of notice with return receipt requested was mailed on the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, and that a copy of return receipt was received on the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, which copy is attached herewith.

DATED: \_\_\_\_\_

\_\_\_\_\_  
Clerk, Decatur Superior Court

**CERTIFICATE OF CLERK OF NOTICE NOT ACCEPTED BY MAIL**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, I mailed a copy of this notice to each of the defendant(s) \_\_\_\_\_ by certified mail, and the same was returned without acceptance this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, and I did notify plaintiff by mail this date of such non-delivery.

DATED: \_\_\_\_\_

\_\_\_\_\_  
Clerk, Decatur Superior Court

**RETURN OF SERVICE OF NOTICE**

I hereby certify that I have served the within notice:

- (1) by delivering on the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, a copy of this notice of claim of each of the within-named defendant(s) \_\_\_\_\_, or
- (2) By leaving on the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_ for each of the within-named defendant(s) \_\_\_\_\_, a copy of the notice of claim at the respective dwelling, house or usual place of abode of \_\_\_\_\_ and by mailing a copy of the notice to \_\_\_\_\_ at his last known address.

\_\_\_\_\_  
Sheriff of \_\_\_\_\_ County, Indiana

By \_\_\_\_\_  
Deputy