



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) _____.

Blank lines for providing a brief statement of the Plaintiff's claim against you.

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.
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...
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