

## Small Claims Form

Please fill out this form and come back to the Court so that we can type this information. Then you will review and sign and we will mail out regular and certified mail.

### Plaintiff:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone No: \_\_\_\_\_

### Defendant: (Must receive mail in the Village of Altamont)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone No: \_\_\_\_\_

### Amount of claim: (no more than \$3,000)

\$ \_\_\_\_\_

### Nature of claim: (very brief, only 2 or 3 sentence)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_