

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE THIRD JUDICIAL DISTRICT
Small Claims Division - P.O. Box 12869, Salem, OR 97309

Plaintiff)

Address)

City State Zip)

Telephone County)
vs.)

Defendant Defendant)

A.K.A. A.K.A.)

CLAIM AND NOTICE OF CLAIM

Case No. _____

Name, Title (if applicable) and Address for Service on Defendant(s):

| | |
|-----------------------|-----------------------|
| Defendant | Defendant |
| A.K.A. Telephone | A.K.A. Telephone |
| Address | Address |
| City State Zip County | City State Zip County |

I, Plaintiff, claim that on or about _____, 20____, the above-named Defendant(s) owed me the sum of \$ _____, and this sum is still owing, for (reason)_____.

I have incurred fees of \$ _____ and service expenses of \$ _____. Claim Amount: _____
 STATE OF OREGON,) Filing Fee: _____
) ss Service Fee: _____
 COUNTY OF MARION) Total Due: _____

I, the above-named plaintiff, having been duly sworn, state that I have read the above claim and that it is true as I verily believe, and that I have made a bona fide effort to collect the claim from the defendant before filing the claim with the clerk.

DATED: _____ Plaintiff

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20_____.

TRIAL COURT ADMINISTRATOR/NOTARY PUBLIC FOR OREGON

(SEAL)

By: _____
My Commission expires: _____

NOTICE TO DEFENDANT: I certify that the foregoing is a true copy of a claim filed against you.

(SEAL)

TRIAL COURT ADMINISTRATOR
By: _____

NOTICE TO DEFENDANT - READ REVERSE SIDE