| STATE OF WISCONSIN, CIRCUIT COURT, | cou | NTY | For Official Use | | |
|---|---|----------------------------------|---|-----------------------------|---------------------|
| Plaintiff: (Name [first, middle, last], Address, City, State, Zip) | | | | | |
| See att | ached for additional plai | ntiffs | | | |
| -vs- | actica for additional plai | | | Amended | |
| To: Defendant(s): (Name [first, middle, last], Address, City | t(s): (Name [first, middle, last], Address, City, State, Zip) | | Summons and Complaint Small Claims | | |
| | | | Case No. | | |
| ☐ See attached for addition | | ndants | ☐ Claim for money (\$10,000 or less) 31001 ☐ Return of property (replevin) 31003 ☐ Eviction 31004 | | |
| If you require reasonable accommodations due to a disab process, please call the scheduled court date. Please note that the court does | at least 10 working days prior to | | ☐ Eviction due to fo☐ Arbitration award☐ Return of earnest | t money | 31006 oney 31008 |
| | | | ☐ Tort/Personal inju | ury (\$5,000 or less) | 31010 |
| To the Defendant(s): | SUMMONS | | When to Appear/ | File an Δnswa | ar . |
| You are being sued as described below. If you wis You must appear at the time and place state | | Date | Time | | 21 |
| AND/OR (Clerk will circle one) You must file a written answer and provide a plaintiff's attorney on or before the date and ti | | | Place to Appear/File an Answer | | |
| If you do not appear or answer, the plaintiff may wir judgment entered for what the plaintiff is asking. | n this case and a | | | | |
| Clerk/Attorney Signature | | Date Summons Issued | | Date Summons Mailed | |
| | COMPLAINT | | | | |
| Plaintiff's Demand: The plaintiff states the following claim against the de 1. Plaintiff demands judgment for: (Check as ap Claim for Money \$ Return of Earnest Money \$ Eviction Return of property (replevin) (Describe property (Not to include Wis. Stats. 425.205 actions to reconstruction Plus interest, costs, attorney fees, if any, and | opropriate) Tort on Evic perty in 2 below.) Cover collateral.) | tion due firmatio ection c | al injury \$e to foreclosure n, vacation, modifi of arbitration award eems proper. | | |
| 2. Brief statement of dates and facts: (If this is an ex | viction action and you are seeking | money da | mages, you must also stat | te that claim on this fo | orm.) |
| See attached for additional information. P Verification: Under oath, I state that the above of belief, and as to those matters, I believe them to | complaint is true, excep be true. | t as tho | se matters stated (| upon informatio | on and |
| State of | I am: plaintiff. Signature of Plaintiff or Attorney | <u></u> a | ttorney for the plain | ntiff. Attorney's State Bar | Number |
| State of County of | • | | | , | |
| | Plaintiff"s/Attorney's Telephone N | Number | Law Firm and Address | | |
| Notary Public/Court Official | | | | | |
| Name Printed or Typed My commission/term expires: | | | | | |