STATE OF MAINE

DISTRICT COURT

		Location
		Docket No
	Plaintiff	
	_ _	
V.		STATEMENT OF CLAIM (Small Claims)
	Defendant	
	· <u></u>	
	ding valeyant dates:	
Briefly describe your claim, include	aing reievant aates:	
The plaintiff requests a judgment		
plus costs. If you are asking for a rescind an agreement, state your		rn property, or to refund money, or to reform or
į,	•	
Date:		
		Signature
The address of the court is:		
The address of the court is:		
Attorney for Plaintiff:		
Address:		
<u></u>		Plaintiff Telephone:
Telephone:	ale	Defendant Telephone:

IMPORTANT NOTICE TO PARTIES

To the plaintiff and the defendant:

You will be notified of the hearing date and time of this case by the clerk of the court. The notice of hearing will be sent to you by regular mail at the address given above unless you notify the clerk of a different address. If the above address is incorrect or if your address changes, you must promptly notify the clerk in writing. Your failure to notify the clerk of an address change will mean that you may not receive notice of the hearing.

IF THE PLAINTIFF FAILS TO APPEAR AT THE HEARING, THE CASE WILL BE DISMISSED. IF THE DEFENDANT FAILS TO APPEAR, A DEFAULT JUDGMENT MAY BE ENTERED AGAINST THE DEFENDANT FOR THE RELIEF SOUGHT BY THE PLAINTIFF.

STATE OF MAINE

		County	
	I have this	day made service of the Statement of Claim up	pon the defendant
	by delivering	ng a copy of the Statement to the defendant in	hand at
☐ age a	by leaving a copy of the Statement with by leaving a copy of the Statement with		· •
Date:			Donuty Shariff
Servi	ce:		Deputy Sheriff
	Travel Postage	\$ \$	
	Total	\$	