JACKSON PARISH JUSTICE OF THE PEACE COURT

Mailing Address:

136 West 2nd St, Quitman, LA 71268

Physical Address:

5185 Quitman Hwy, North Hodge, LA 71247

318-259-9609

STATEMENT OF CLAIM AND CITATION

SUIT NUMBER: _____

PLAINTIFF **VERSUS** **DEFENDANT**

PLEASE FILL OUT AS MUCH AS YOU CAN.

_____ _____

FULL NAME OF SUING PARTY FULL NAME OF PARTY BEING SUED

_____ _____

PHONE: PHONE:

_____ _____

STREET ADDRESS OF PLAINTIFF STREET ADDRESS OF DEFENDANT

_____ _____

CITY, STATE, ZIP CODE CITY, STATE, ZIP CODE

_____ _____

EMAIL ADDRESS/ FAX NUMBER NAME OF EMPLOYER/ADDRESS

_____

SS#/DOB

PLAINTIFF CLAIMS THE FOLLOWING RELIEF FROM DEFENDANT (Short Statement of Plaintiff's claim and reasons.) If claim is for money, state the date and manner in which indebtedness arose. If claim is for movable property, give description, location, and value.

Attach copies of any written supporting documents.

Amount sued for $_____, plus legal interest and court costs.

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SIGNATURE OF PLAINTIFF