

STATEMENT OF SMALL CLAIM AND NOTICE Part A - ORIGINAL (For Court File)	DOCKET NO. (For Court Use Only)	Trial Court of Massachusetts Small Claims Session
<p>NOTICE TO PLAINTIFF: You may bring your small claim only in the court for the area where either the plaintiff or the defendant lives or has a place of business or employment. A small claim against a landlord arising from the rental of an apartment may also be brought where the apartment is located. You may find it easier to enforce a decision in your favor if you bring your small claim where the defendant lives or works, but you are not required to do so. The Clerk-Magistrate's office can tell you which court serves an area and the fee you must pay to file your claim.</p>		
COURT DIVISION WHERE THE PLAINTIFF IS FILING THIS CLAIM		
PLAINTIFF INFORMATION: The person filing the claim is the plaintiff.	PLAINTIFF'S ATTORNEY (if any)	
Pltf. Name: Address: City/State/Zip: Phone No.:	Atty. Name: Address: City/State/Zip: Phone No.: BBO NO:	
<p>DEFENDANT(S) INFORMATION: The person or corporation being sued is the defendant. If you are suing a company which is not a corporation, you should name the owner(s) doing business as the named company as the defendant; the names of the owner(s) can be obtained from the City or Town Clerk where the company's offices are located. If you are suing a company which is a corporation, you must have the exact legal name. You can find this information from the Corporate Records Division of the Secretary of State's Office, One Ashburton Place, Room 1712, Boston, MA 02108.</p>		
Def. #1 Name: Address: City/State/Zip: Phone No.:	Def. #2 Name: Address: City/State/Zip: Phone No.:	
<p>PLAINTIFF'S CLAIM: Fill in below the amount you are suing for and briefly explain your claim. State your claim clearly so the defendant can understand why he or she is being sued. Give the date of the event that is the basis of your claim. Fill in as "costs" the amount of the filing fee. The Plaintiff claims that the Defendant(s) OWE _____ plus _____ court costs for the following reasons:</p>		
SIGNATURE OF PLAINTIFF: X DATE:		
<p>MEDIATION: Mediation of this claim may be available if both parties agree to discuss the matter with a mediator, who will assist the parties in trying to resolve the dispute on mutually agreed to terms. The plaintiff must notify the court if he or she desires mediation; the defendant may consent to mediation on the trial date. The plaintiff is willing to attempt to settle this claim through mediation: <input type="checkbox"/> YES <input type="checkbox"/> NO</p>		
<p>MILITARY AFFIDAVIT: The plaintiff states under the pains and penalties of perjury that the:</p> <p><input type="checkbox"/> above defendant(s) is (are) not serving in the military and at present live(s) or works at the above address.</p> <p><input type="checkbox"/> above defendant(s) is (are) serving in the military. <input type="checkbox"/> I am unsure if the above defendant(s) is (are) in the military.</p>		
SIGNATURE OF PLAINTIFF: X DATE:		
<p>INSTRUCTIONS TO PLAINTIFF: You must sign and date this claim and the military affidavit, and return Parts A, B and C of the completed form to the court, together with a check or money order (made payable to "Clerk-Magistrate") for the filing fee. You may bring or mail the completed form and filing fee to the Clerk-Magistrate's office of the court where you are filing your case.</p>		

STATEMENT OF SMALL CLAIM AND NOTICE Part B - DEFENDANT COPY (to be sent with Trial Notice)	DOCKET NO. (For Court Use Only)	Trial Court of Massachusetts Small Claims Session				
NOTICE TO THE DEFENDANT(S) NAMED BELOW: You are being sued in Small Claims Court by the below named plaintiff. You are directed to appear for trial of this claim on the date and time that is noted on the NOTICE OF SMALL CLAIM TRIAL form that is attached to this copy of the plaintiff's claim. If you wish to settle this claim before the trial date, you should contact the plaintiff or the plaintiff's attorney.						
COURT DIVISION WHERE THE PLAINTIFF IS FILING THIS CLAIM						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> PLAINTIFF INFORMATION: The person filing the claim is the plaintiff. </td> <td style="width: 50%; padding: 5px;"> PLAINTIFF'S ATTORNEY (if any) </td> </tr> <tr> <td style="padding: 5px;"> Pltf. Name: Address: City/State/Zip: Phone No.: </td> <td style="padding: 5px;"> Atty. Name: Address: City/State/Zip: Phone No.: BBO NO: </td> </tr> </table>			PLAINTIFF INFORMATION: The person filing the claim is the plaintiff.	PLAINTIFF'S ATTORNEY (if any)	Pltf. Name: Address: City/State/Zip: Phone No.:	Atty. Name: Address: City/State/Zip: Phone No.: BBO NO:
PLAINTIFF INFORMATION: The person filing the claim is the plaintiff.	PLAINTIFF'S ATTORNEY (if any)					
Pltf. Name: Address: City/State/Zip: Phone No.:	Atty. Name: Address: City/State/Zip: Phone No.: BBO NO:					
DEFENDANT(S) INFORMATION: The person or corporation being sued is the defendant.						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> Def. #1 Name: Address: City/State/Zip: Phone No.: </td> <td style="width: 50%; padding: 5px;"> Def. #2 Name: Address: City/State/Zip: Phone No.: </td> </tr> </table>			Def. #1 Name: Address: City/State/Zip: Phone No.:	Def. #2 Name: Address: City/State/Zip: Phone No.:		
Def. #1 Name: Address: City/State/Zip: Phone No.:	Def. #2 Name: Address: City/State/Zip: Phone No.:					
PLAINTIFF'S CLAIM <div style="text-align: center; padding: 20px 0;"> The Plaintiff claims that the Defendant(s) OWE plus court costs for the following reasons: </div>						
MEDIATION: Mediation of this claim may be available if both parties agree to discuss the matter with a mediator, who will assist the parties in trying to resolve the dispute on mutually agreed to terms. The plaintiff must notify the court if he or she desires mediation; the defendant may consent to mediation on the trial date. The plaintiff is willing to attempt to settle this claim through mediation: <input type="checkbox"/> YES <input type="checkbox"/> NO						
MILITARY AFFIDAVIT: The plaintiff states under the pains and penalties of perjury that the:						
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> above defendant(s) is (are) not serving in the military and at present live(s) or works at the above address. </div> <div> <input type="checkbox"/> above defendant(s) is (are) serving in the military. </div> <div> <input type="checkbox"/> I am unsure if the above defendant(s) is (are) in the military. </div> </div>						

STATEMENT OF SMALL CLAIM AND NOTICE Part C - PLAINTIFF COPY (to be sent with Trial Notice)	DOCKET NO. (For Court Use Only)	Trial Court of Massachusetts Small Claims Session
NOTICE TO THE PLAINTIFF NAMED BELOW: You have sued the below named defendant(s) in Small Claims Court. You are directed to appear for trial of this claim on the date and time that is noted on the NOTICE OF SMALL CLAIM TRIAL form that is attached to this copy of your claim.		
COURT DIVISION WHERE THE PLAINTIFF IS FILING THIS CLAIM		
PLAINTIFF INFORMATION: The person filing the claim is the plaintiff.	PLAINTIFF'S ATTORNEY (if any)	
Pltf. Name: Address: City/State/Zip: Phone No.:	Atty. Name: Address: City/State/Zip: Phone No.: BBO NO:	
DEFENDANT(S) INFORMATION: The person or corporation being sued is the defendant.		
Def. #1 Name: Address: City/State/Zip: Phone No.:	Def. #2 Name: Address: City/State/Zip: Phone No.:	
PLAINTIFF'S CLAIM <div style="text-align: center; margin-top: 20px;"> The Plaintiff claims that the Defendant(s) OWE plus court costs for the following reasons: </div>		
MEDIATION: Mediation of this claim may be available if both parties agree to discuss the matter with a mediator, who will assist the parties in trying to resolve the dispute on mutually agreed to terms. The plaintiff must notify the court if he or she desires mediation; the defendant may consent to mediation on the trial date. The plaintiff is willing to attempt to settle this claim through mediation: <input type="checkbox"/> YES <input type="checkbox"/> NO		
MILITARY AFFIDAVIT: The plaintiff states under the pains and penalties of perjury that the:		
<input type="checkbox"/> above defendant(s) is (are) not serving in the military and at present live(s) or works at the above address.		
<input type="checkbox"/> above defendant(s) is (are) serving in the military. <input type="checkbox"/> I am unsure if the above defendant(s) is (are) in the military.		

STATEMENT OF SMALL CLAIM AND NOTICE Part D - FOR PLAINTIFF'S RECORDS	DOCKET NO. (For Court Use Only)	Trial Court of Massachusetts Small Claims Session
<p>NOTICE TO PLAINTIFF: You may bring your small claim only in the court for the area where either the plaintiff or the defendant lives or has a place of business or employment. A small claim against a landlord arising from the rental of an apartment may also be brought where the apartment is located. You may find it easier to enforce a decision in your favor if you bring your small claim where the defendant lives or works, but you are not required to do so. The Clerk-Magistrate's office can tell you which court serves an area and the fee you must pay to file your claim.</p>		
COURT DIVISION WHERE THE PLAINTIFF IS FILING THIS CLAIM		
PLAINTIFF INFORMATION: The person filing the claim is the plaintiff.		PLAINTIFF'S ATTORNEY (if any)
Pltf. Name: Address: City/State/Zip: Phone No.:	Atty. Name: Address: City/State/Zip: Phone No.: BBO NO:	
<p>DEFENDANT(S) INFORMATION: The person or corporation being sued is the defendant. If you are suing a company which is not a corporation, you should name the owner(s) doing business as the named company as the defendant; the names of the owner(s) can be obtained from the City or Town Clerk where the company's offices are located. If you are suing a company which is a corporation, you must have the exact legal name. You can find this information from the Corporate Records Division of the Secretary of State's Office, One Ashburton Place, Room 1712, Boston, MA 02108.</p>		
Def. #1 Name: Address: City/State/Zip: Phone No.:	Def. #2 Name: Address: City/State/Zip: Phone No.:	
<p>PLAINTIFF'S CLAIM: Fill in below the amount you are suing for and briefly explain your claim. State your claim clearly so the defendant can understand why he or she is being sued. Give the date of the event that is the basis of your claim. Fill in as "costs" the amount of the filing fee. The Plaintiff claims that the Defendant(s) OWE _____ plus _____ court costs for the following reasons:</p>		
<p>MEDIATION: Mediation of this claim may be available if both parties agree to discuss the matter with a mediator, who will assist the parties in trying to resolve the dispute on mutually agreed to terms. The plaintiff must notify the court if he or she desires mediation; the defendant may consent to mediation on the trial date. The plaintiff is willing to attempt to settle this claim through mediation: <input type="checkbox"/> YES <input type="checkbox"/> NO</p>		
<p>MILITARY AFFIDAVIT: The plaintiff states under the pains and penalties of perjury that the:</p> <p><input type="checkbox"/> above defendant(s) is (are) not serving in the military and at present live(s) or works at the above address.</p> <p><input type="checkbox"/> above defendant(s) is (are) serving in the military. <input type="checkbox"/> I am unsure if the above defendant(s) is (are) in the military.</p>		
<p>INSTRUCTIONS TO PLAINTIFF: You must sign and date this claim and the military affidavit, and return Parts A, B and C of the completed form to the court, together with a check or money order (made payable to "Clerk-Magistrate") for the filing fee. You may bring or mail the completed form and filing fee to the Clerk-Magistrate's office of the court where you are filing your case.</p>		