SMALL CLAIM COMPLAINT

Plaintiff,	STRUTHERS MUNICIPAL COURT			
Name				
Address				
City/State/Zip Code				
Phone)	SMALL CLAIMS DIVISION Case number CVI			
vs. (1) Defendant,	(2) Defendant,			
Name	Name			
Address	Address			
City/State/Zip Code	City/State/Zip Code			
Phone)	Phone			

TO THE CLERK:

Please take notice that the claim is hereby filed against the above defendant(s) and request that he/she/they be summoned to appear in Court to answer same.

STATEMENT OF CLAIM

□ ACCOUNT – EXHIBIT "A	" ATTA	CHED AN	ND MADE A PART HEREOF	\Box WAGES \$	
\Box OTHER – PLAINTIFF CL	AIMS D	EFENDA	NT OWES THE SUM OF \$		FOR
(attach additional sheet if nee	eded)				
Wherefore Plaintiff(s) asks for	or iudgm	ent agai	nst the Defendant(s) in the sum	of \$	plus interest
		-	, 20, at the rate of		-
•			A hearing notice is attache		
your hearing.					
STATE OF OHIO)				
COUNTY OF MAHONING)	SS.	AFFIDAVIT OF CLAII	MS	
			being first duly sworn, on oath s		
the Plaintiff in the above e	ntitled o	cause, tha	at the said cause is for the paym	ent of money,	that the nature of
Plaintiff's demand as stated, and that there is due to Plaintiff(s) from the Defendant(s) the amount state above, and					
that the Defendant(s) is/are i	not now	in the m	ilitary or naval service of the U	nited States.	

Subscribed and sworn to before me this ______ day of ______, 20_____.

Clerk, Deputy Clerk, Notary Public