

Sidney Municipal Court
110 W. Court St.
Sidney, OH 45365
Phone: 937-498-8712

The following Small Claims forms are attached:

Small Claims Information Sheet and Complaint Sheet.

Instructions:

1. Information Sheet, fill in all fields.
2. Complaint Sheet, fill in all the remaining fields. (Some fields will automatically fill with the information you provided on the information sheet.)
3. Print off the appropriate number of copies. The Court requires the originals, at least one copy of all forms for each defendant, and if you would like a copy returned.
4. Be sure to sign all forms. The complaint needs to be notarized. Our deputy clerks can notarize your signature at the court or you will need to have a notary do it on your own if you wish to mail the forms with the filing fee.
5. Include the filing fee, all the original forms, and all the copies either by Mail or In Person to:

The Sidney Municipal Court
110 W. Court St.
Sidney, Ohio 45365

The Filing fee is:

One Defendant: \$79.00
Two Defendants: \$94.00

6. If you have any questions about completing the paperwork, please contact the Clerk's office at 937-498-8712.
7. If you have questions regarding the statutory interest rates, please refer to the Ohio Department of Taxation's website at: <https://tax.ohio.gov/individual/resources/interest-rates>.
If you leave the interest rate box blank on the information sheet and complaint, the Court will default to the statutory rate.

Small Claims Maximum is \$6,000

Sidney Municipal Court

110 W. Court St.
Sidney, OH 45365
937-498-8712

SMALL CLAIMS INFORMATION SHEET

Plaintiff: _____

Defendant: _____

Plaintiff: _____

Defendant: _____

Address: _____

Address: _____

Address: _____

Address: _____

City, State, ZIP: _____

City, State, ZIP: _____

Telephone #: _____

Telephone #: _____

Is DEFENDANT(S) presently in the military or naval service of the United States? _____
(YES or NO)

COMPLAINT: _____

AMOUNT CLAIMED \$ _____, with interest at the rate of _____ % from the
_____ day of _____, 20_____.

The above information is true to the best of my belief.

(PLAINTIFF'S SIGNATURE)

If the Interest rate box above is
left blank, the Court will default to
the statutory rate.

Sidney Municipal Court

110 W. Court St.
Sidney, OH 45365
Phone: 937-498-8712

Plaintiff: _____

VS

Defendant: _____

Address: _____

Address: _____

City, State, Zip Code: _____

Plaintiff: _____

Case Number: _____

Defendant: _____

Address: _____

Address: _____

City, State, Zip Code: _____

TO THE CLERK:

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

STATEMENT OF CLAIM

____ Account-Exhibit A attached and made a part hereof

____ Other – See Attached Exhibit

MAKE CERTIFIED CHECK OR MONEY ORDER PAYABLE TO OR PAY IN CASH ONLY AT THE SIDNEY MUNICIPAL COURT IN THE AMOUNT OF \$ _____. (Amount Owed + court costs)

Wherefore Plaintiff(s) prays judgment against defendant(s) in the sum of \$ _____ plus interest from the _____ day of _____, 20____ at the rate of _____% and costs.

THE STATE OF OHIO COUNTY OF SHELBY; AFFIDAVIT OF COMPLAINANT'S CLAIM

Plaintiff(s) _____, _____ being first duly sworn, on oath states that _____, _____ the plaintiff(s) in the above entitled cause; that the said cause is for the payment of money that the nature of plaintiff's demand is as stated, and that there is due to the plaintiff(s) from the defendant(s) in the amount stated above, defendant(s) are now not in the military or naval service of the United States.

X _____

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

DEPUTY CLERK/NOTARY

NOTICE AND SUMMONS IN ACTION FOR MONEY ONLY

TO Defendant(s): _____,

Plaintiff(s), _____, _____ asks judgment in this Court against you for \$ _____ Dollars plus interest from _____ day of _____, 20_____ at the rate of _____% and costs, upon the following claim.

THE COURT WILL HOLD TRIAL ON THIS CLAIM IN THE SMALL CLAIMS DIVISION LOCATED AT SIDNEY MUNICIPAL COURT, 110 WEST COURT ST., SIDNEY, OH 45365 AT 1:30 PM ON WEDNESDAY THE _____ DAY OF _____, 20_____.

If you do not appear at the trial, judgment may be entered against you by default, and your earnings may be subjected to garnishment or your property may be attached to satisfy said judgment. If your defense is supported by witnesses, account books, receipts, or other documents, you must produce them at the trial. Subpoenas for witnesses, if requested by a party, will be issued by the clerk. If you admit the claim but desire time to pay, you may make such a request at the trial.

DEPUTY CLERK