

STATEMENT OF CLAIM

State of Louisiana – Ward 8 Justice Court – St. Tammany Parish
Phone (985) 288-5429 Email jp@ward8jpcourt.com

CASE NO. _____

Plaintiff: _____

Phone: _____

Address: _____

Fax: _____

VS

Defendant(s) _____ Phone: _____

Address: _____

Date of Birth: _____ SS# _____

Address of Employer: _____

Agent for Service (if defendant is a corporation) _____

Suit Amount \$ _____ Plus identify by (X) _____ Court Cost _____ Interest _____ Attorney Fees _____

Please attach two (2) copies of any documents to support your claim.

Give an explanation of your claim below (if more room is needed attach a separate sheet)

Plaintiff affirms the facts and documents submitted in this claim are true and accurate.

DATE FILED: _____ SIGNATURE _____
Plaintiff or Representative Thereof _____

Name and address of attorney if appropriate: _____

NOTICE TO ALL PARTIES: During the duration of the lawsuit, the Court will contact you at the above address and phone number you have provided. If either address or phone number should change you must notify the Court immediately. Unless this pleading is accompanied by your written objection, your case may be decided by an Ad Hoc Judge appointed by the Judge. If so appointed, his/her decision will be final and binding.