

# SAMPLE

## Hamilton County Municipal Court, Cincinnati, Ohio Small Claims Complaint

**Your Name** \_\_\_\_\_

**Case No.** \_\_\_\_\_

**Your Street Address** \_\_\_\_\_

(D) and \_\_\_\_\_

In accordance with civil rule 4.6 (C) or  
4.6 (E), an ordinary mail waiver is requested

**Your City, State & Zip Code, Your Phone Number**

Plaintiff(s)

Phone Number

VS.

**The PARTY/PARTIES You Are Suing** \_\_\_\_\_

Amount \$ **Amount You Are Suing For**  
**HAS TO BE \$6,000.00 OR LESS**

**\*\*ADDRESS REQUIRED BELOW IN** \_\_\_\_\_

**SERVICE ADDRESS SECTION\*\*** \_\_\_\_\_

Defendant(s)

Plaintiff says that there is due and owing from the defendant(s) the sum of **Write the amount out you are suing for** dollars

For the following reason(s): **Nature of Claim (Be As Brief As Possible)** \_\_\_\_\_

Interest, if applicable, from the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ **Plus Court Costs.**

**ATTENTION: ALLOW SUFFICIENT TIME TO ENTER THE COURTHOUSE DUE TO SECURITY CHECK. DELAYS POSSIBLE.**

**\*SERVICE ADDRESSES\*** Notice and summons in action for money only

To: (1) **Party Name and/or In Care Of** \_\_\_\_\_

(2) \_\_\_\_\_

**Their Street Address** \_\_\_\_\_

**Their City, State & Zip Code** \_\_\_\_\_

**Notice to the Defendant:** The court will hold trial on this claim at the Hamilton County Courthouse, 1000 Main St., **Rm. 265 at 9:00 A.M.**, on:

**If you do not appear at the trial, judgment may be entered against you by default**, and your earnings may be subject to garnishment, or your property may be attached to satisfy the judgment. If your defense is supported by witnesses, account books, receipts, or other documentation, you must produce them at the trial. Subpoenas for witnesses, if necessary, should be filed with the clerk at least seven (7) days before the trial. If you believe you have a claim against the plaintiff, you must file a counterclaim with the court and must serve the plaintiff and all other parties with a copy of the counterclaim at least seven (7) days prior to the trial date of the plaintiff's claim. **All filings to be filed/mailed with the appropriate fees to: Hamilton County Clerk of Courts 1000 Main St. Rm. 115, Cincinnati, Ohio 45202.** If you admit the claim but desire time to pay, you may make such a request at the trial.

Memorandum to the Plaintiff

Bring your evidence and witnesses, if any, with you. Subpoenas for witnesses, if necessary, must be filed with the clerk at least seven (7) days before the trial date. **On accident cases involving a motor vehicle, you must bring your title to the vehicle.**

Plaintiff further states that to the best of their knowledge the defendant is / is not a member of the Armed Forces of the United States of America.

**X** **Your Signature** \_\_\_\_\_

Signature of Plaintiff/Attorney

**Your Phone Number** \_\_\_\_\_

Phone No.

Attorney ID No.

Attorney Address Only

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Clerk, Deputy Clerk, Notary Public