

CLAIM AFFIDAVIT
(See Instructions on Reverse Side)

Form 2

_____ County, North Dakota

Case No. _____

| | | | |
|--|------|------------------|----------|
| Full Name of Person(s) Filing Claim (PLAINTIFF(S)) | | | |
| Address | City | State | Zip Code |
| Occupation | | Telephone Number | |

| | | | |
|---|------|------------------|----------|
| Full Name of Person(s) You are Suing (DEFENDANT(S)) | | | |
| Address | City | State | Zip Code |
| Occupation | | Telephone Number | |

PLAINTIFF(S) claims the following from the DEFENDANT(S): (Give a SHORT statement of the claim, reasons for the claims, and the amount you are suing for. TOTAL AMOUNT CLAIMED \$ _____ PLUS COURT COSTS.

(Attach additional sheet if necessary.)

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

Plaintiff's Signature

Clerk or Notary Public
_____ County, North Dakota

If notary, my commission expires: _____

**NOTICE TO DEFENDANT: REQUEST FOR HEARING/
REMOVAL TO DISTRICT COURT**

If you, the Defendant, intend to contest this claim and request a hearing in small claims court, or request removal of this case to District Court, you must file your REQUEST FOR HEARING/REMOVAL TO DISTRICT COURT (**Form 3**) with the Clerk of District Court **within 20 days of receipt of this Claim Affidavit.**

WHITE - COURT'S COPY CANARY - PLAINTIFF'S COPY PINK - DEFENDANT'S COPY

FORM 2 – INSTRUCTIONS TO THE PERSON WISHING TO FILE A CLAIM

STEP ONE: First complete the "CLAIM AFFIDAVIT" (on the reverse side of this page).

You must have the full name and address of each person you sue. After you have completed your CLAIM AFFIDAVIT you should sign it before a Clerk of the Court or a Notary Public.

Fill out, sign, and have notarized an "Affidavit of Identification" (FORM 8) for each Defendant in the case.

STEP TWO: Return the Claim Affidavit to the Clerk of District Court. You must file the Claim Affidavit and pay the \$10.00 filing fee BEFORE serving the Defendant.

STEP THREE: You must now SERVE the Defendant with the following forms:

One copy of FORM 1 - Small Claims Court Information.

One copy of FORM 2 - Claim Affidavit.

All copies of FORM 3 - Request for Hearing/Removal to District Court.

All copies of FORM 4 – Defendant's Answer and Counterclaim.

One copy of FORM 5 - Affidavit of Mailing for Counterclaim.

One copy of FORM 7 - North Dakota Small Claims Court Act.

NOTE: If you are filing a claim against more than one Defendant, you must serve each Defendant with the above copies.

The back of FORM 6 has your instructions on how to serve the Defendant.

STEP FOUR: You must next complete the "AFFIDAVIT OF SERVICE" (FORM 6). Fill out the appropriate section of FORM 6 and have the person mailing to or serving the Defendant sign the form in front of a Clerk of Court or Notary Public. If you mail the forms to the defendant by restricted delivery return receipt mail, YOU MUST file the Affidavit of Service and the signed, return receipt with the Clerk of District Court AS SOON as you receive the receipt from the post office.

If the sheriff serves the papers, the sheriff will provide you with a completed Affidavit of Service and Form 6 may be discarded. You must file the sheriff's affidavit with the Clerk of District Court as soon as you receive it from the sheriff's department.

STEP FIVE: If the defendant requests a hearing in small claims court on this claim, the court will schedule the hearing not less than 10 days nor more than 30 days after receiving the defendant's request. The court will send notice to you of the hearing date. At the time set for the hearing you MUST COME TO COURT. If you fail to appear your claim may be dismissed, and you may be prohibited from bringing it up again.