

**IN THE COUNTY COURT OF THE NINETEENTH JUDICIAL CIRCUIT
IN AND FOR MARTIN COUNTY, FLORIDA
CIVIL DIVISION**

Plaintiff(s) CASE NO.: _____
JUDGE: _____

Address _____
(number) (street)

(city) (state) (zip code)

Phone: _____

vs

Defendant(s)

Address _____
(number) (street)

(city) (state) (zip code)

Phone: _____

STATEMENT OF CLAIM

The above named Plaintiff(s) sue(s) the above named Defendant(s) for (check one):

- | | |
|---|---|
| <input type="checkbox"/> Auto negligence. | <input type="checkbox"/> Money lent. |
| <input type="checkbox"/> Goods sold. | <input type="checkbox"/> Promissory note. |
| <input type="checkbox"/> Work done and materials furnished. | <input type="checkbox"/> Other. |

Please give a brief description on the lines below:

Wherefore, Plaintiff(s) demand(s) judgment in the amount of \$ _____ plus court costs.

STATE OF FLORIDA, COUNTY OF MARTIN:

The undersigned says that he/she is the _____ of/for the above named Plaintiff; that the foregoing is a just and true statement of the amount owing by the above named Defendant(s) to Plaintiff(s), exclusive of all set-offs and just grounds of defense.

Signature of Plaintiff or Agent

The foregoing instrument was sworn to or affirmed and subscribed before me by means of [] physical presence or [] online notarization this _____ day of _____, by _____ who is personally known to me or who has produced _____ as identification and who did [] did not [] take an oath.

CAROLYN TIMMANN
Clerk of the Circuit Court & Comptroller

BY: _____ or _____
Deputy Clerk Notary Public

Typed or Printed Name or Typed or Printed Name