



Civil | Eviction | Probate | Family Law | Real Estate

SMALL CLAIMS

YOUR INFORMATION

Name _____

Company Name (if applicable): _____

Mailing Address _____
Street City State Zip

Physical Address _____
Street City State Zip

Telephone Number: (_____) _____

- I authorize emails concerning my case
- I authorize a follow up call concerning my consultation

OTHER PARTIES INFORMATION (person/business you are suing)

Name _____

Company Name (if applicable): _____

Mailing Address _____
Street City State Zip

Physical address _____
Street City State Zip

Telephone Number: (_____) _____

CASE INFORMATION

How much are you suing for: \$ _____

Why does the defendant owe you this money? (Please be specific and give as many details as possible)



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When did this happen: _____

Have you asked the other party to pay you; _____ YES _____ NO

If yes when did you ask and how did the defendant respond?:

Are you willing to negotiate an agreement: _____ Yes _____ NO

If yes, what are your terms:

I, the undersigned, declare the following:

It has been disclosed to the Customer that Inland Valley Doc Prep is owned and operated by document preparers that are prohibited by law from giving legal advice. The Customer acknowledges that the Preparer is prohibited by law from giving legal advice and shall hold Preparer harmless of the outcome of court rulings, hearings, and any motions filed against the Customer. The Customer understands that he or she is responsible for his or her legal decisions and declarations made by Preparer which is incorporated in the documents prepared by this Preparer. The Customer also acknowledges that Inland Valley Doc Prep does not represent Customer and that Customer must appear for himself/herself in all Court proceedings and hearings. The Client must take responsibility for Customer's actions and arguments. Inland Valley Doc Prep is responsible for meeting the proper statutes in relations to preparation of Customer's paperwork and pleadings, including formatting the documents properly.

By checking this box and signing below, I agree with the above declaration.

Date: _____

Please Print Your Name

Please Sign