

PI/PD - Complaint

SAMPLE

Use the samples to help you complete
the packet of blank forms.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):

FOR COURT USE ONLY

YOUR NAME
YOUR STREET ADDRESS
YOUR CITY, STATE, ZIP CODE
TELEPHONE NO.: YOUR PHONE# FAX NO.:
ATTORNEY FOR (Name): IN PRO PER

SAMPLE ONLY
Do not write on this copy!

SUPERIOR COURT OF CALIFORNIA, COUNTY OF **SANTA CLARA**
STREET ADDRESS: **CHECK WITH STAFF**
MAILING ADDRESS:
CITY AND ZIP CODE:
BRANCH NAME: **CIVIL**

CASE NAME: **YOUR LAST NAME VS. LAST NAME OF THE PERSON YOU ARE SUING**

CIVIL CASE COVER SHEET
 Unlimited Amount demanded
 Limited (Amount demanded is)
Check the box with the amount you are suing for

Complex Case Designation
 Counter Joinder

Filed with first appearance by defendant (Cal. Rules of Court, rule 3.402)

CASE NUMBER: **LEAVE BLANK**
JUDGE: **LEAVE BLANK**
DEPT.: **LEAVE BLANK**

1-6 below must be completed (see instructions on page 2).

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Auto Tort

- Auto (22)
- Uninsured motorist (46)

Other PI/PD/WD (Personal Injury/Property Damage/Wrongful Death) Tort

- Asbestos (04)
- Product liability (24)
- Medical malpractice (45)
- Other PI/PD/WD (23)

Non-PI/PD/WD (Other) Tort

- Business tort/unfair business practice (07)
- Civil rights (08)
- Defamation (13)
- Fraud (16)
- Intellectual property (19)
- Professional negligence (25)
- Other non-PI/PD/WD tort (35)

Employment

- Wrongful termination (36)
- Other employment (15)

Contract

- Breach of contract/warranty (06)
- Rule 3.740 collections (09)
- Other collections (09)
- Insurance coverage (18)
- Other contract (37)

Real Property

- Eminent domain/Inverse condemnation (14)
- Wrongful eviction (33)
- Other real property (26)

Unlawful Detainer

- Commercial (31)
- Residential (32)
- Drugs (38)

Judicial Review

- Asset forfeiture (05)
- Petition re: arbitration award (11)
- Writ of mandate (02)
- Other judicial review (39)

Provisionally Complex Civil Litigation (Cal. Rules of Court, rules 3.400-3.403)

- Antitrust/Trade regulation (03)
- Construction defect (10)
- Mass tort (40)
- Securities litigation (28)
- Environmental/Toxic tort (30)
- Insurance coverage claims arising from the above listed provisionally complex case types (41)

Enforcement of Judgment

- Enforcement of judgment (20)

Miscellaneous Civil Complaint

- RICO (27)
- Other complaint (not specified above) (42)

Miscellaneous Civil Petition

- Partnership and corporate governance (21)
- Other petition (not specified above) (43)

CHECK THE CORRECT BOX(ES)

2. This case is is not complex under rule 3.400 of the California Rules of Court. If the case is complex, mark the factors requiring exceptional judicial management:

- a. Large number of witnesses
- b. Coordination with related actions pending in one or more courts in other countries, states, or countries, or in a federal court
- c. Substantial amount of documentary evidence
- d. Substantial postjudgment judicial supervision

CHECK BOX "c." IF YOU ARE ASKING FOR PUNITIVE DAMAGES

3. Remedies sought (check all that apply): a. monetary b. nonmonetary; declaratory or injunctive relief c. punitive

4. Number of causes of action (specify): **# OF CAUSES OF ACTION ATTACHED**

5. This case is is not a class action suit.

6. If there are any known related cases, file and serve a notice of related case. (You may use form CM-015.)

Date: **TODAY'S DATE**

PRINT YOUR NAME
(TYPE OR PRINT NAME)

SIGN YOUR NAME
(SIGNATURE OF PARTY OR ATTORNEY FOR PARTY)

NOTICE

- Plaintiff must file this cover sheet with the first paper filed in the action or proceeding (except small claims cases or cases filed under the Probate Code, Family Code, or Welfare and Institutions Code). (Cal. Rules of Court, rule 3.220.) Failure to file may result in sanctions.
- File this cover sheet in addition to any cover sheet required by local court rule.
- If this case is complex under rule 3.400 et seq. of the California Rules of Court, you must serve a copy of this cover sheet on all other parties to the action or proceeding.
- Unless this is a collections case under rule 3.740 or a complex case, this cover sheet will be used for statistical purposes only.

INSTRUCTIONS ON HOW TO COMPLETE THE COVER SHEET

To Plaintiffs and Others Filing First Papers. If you are filing a first paper (for example, a complaint) in a civil case, you **must** complete and file, along with your first paper, the *Civil Case Cover Sheet* contained on page 1. This information will be used to compile statistics about the types and numbers of cases filed. You must complete items 1 through 6 on the sheet. In item 1, you must check **one** box for the case type that best describes the case. If the case fits both a general and a more specific type of case listed in item 1, check the more specific one. If the case has multiple causes of action, check the box that best indicates the **primary** cause of action. To assist you in completing the sheet, examples of the cases that belong under each case type in item 1 are provided below. A cover sheet must be filed only with your initial paper. Failure to file a cover sheet with the first paper filed in a civil case may subject a party, its counsel, or both to sanctions under rules 2.30 and 3.220 of the California Rules of Court.

To Parties in Rule 3.740 Collections Cases. A "collections case" under rule 3.740 is defined as an action for recovery of money owed in a sum stated to be certain that is not more than \$25,000, exclusive of interest and attorney's fees, arising from a transaction in which property, services, or money was acquired on credit. A collections case does not include an action seeking the following: (1) tort damages, (2) punitive damages, (3) recovery of real property, (4) recovery of personal property, or (5) a prejudgment writ of attachment. The identification of a case as a rule 3.740 collections case on this form means that it will be exempt from the general time-for-service requirements and case management rules, unless a defendant files a responsive pleading. A rule 3.740 collections case will be subject to the requirements for service and obtaining a judgment in rule 3.740.

To Parties in Complex Cases. In complex cases only, parties must also use the *Civil Case Cover Sheet* to designate whether the case is complex. If a plaintiff believes the case is complex under rule 3.400 of the California Rules of Court, this must be indicated by completing the appropriate boxes in items 1 and 2. If a plaintiff designates a case as complex, the cover sheet must be served with the complaint on all parties to the action. A defendant may file and serve no later than the time of its first appearance a joinder in the plaintiff's designation, a counter-designation that the case is not complex, or, if the plaintiff has made no designation, a designation that the case is complex.

CASE TYPES AND EXAMPLES

Auto Tort

Auto (22)-Personal Injury/Property Damage/Wrongful Death
Uninsured Motorist (46) (*if the case involves an uninsured motorist claim subject to arbitration, check this item instead of Auto*)

Other PI/PD/WD (Personal Injury/Property Damage/Wrongful Death) Tort

Asbestos (04)
Asbestos Property Damage
Asbestos Personal Injury/Wrongful Death
Product Liability (*not asbestos or toxic/environmental*) (24)
Medical Malpractice (45)
Medical Malpractice-Physicians & Surgeons
Other Professional Health Care Malpractice
Other PI/PD/WD (23)
Premises Liability (e.g., slip and fall)
Intentional Bodily Injury/PD/WD (e.g., assault, vandalism)
Intentional Infliction of Emotional Distress
Negligent Infliction of Emotional Distress
Other PI/PD/WD

Non-PI/PD/WD (Other) Tort

Business Tort/Unfair Business Practice (07)
Civil Rights (e.g., discrimination, false arrest) (*not civil harassment*) (08)
Defamation (e.g., slander, libel) (13)
Fraud (16)
Intellectual Property (19)
Professional Negligence (25)
Legal Malpractice
Other Professional Malpractice (*not medical or legal*)
Other Non-PI/PD/WD Tort (35)

Employment

Wrongful Termination (36)
Other Employment (15)

Contract

Breach of Contract/Warranty (06)
Breach of Rental/Lease Contract (*not unlawful detainer or wrongful eviction*)
Contract/Warranty Breach-Seller Plaintiff (*not fraud or negligence*)
Negligent Breach of Contract/Warranty
Other Breach of Contract/Warranty
Collections (e.g., money owed, open book accounts) (09)
Collection Case-Seller Plaintiff
Other Promissory Note/Collections Case
Insurance Coverage (*not provisionally complex*) (18)
Auto Subrogation
Other Coverage
Other Contract (37)
Contractual Fraud
Other Contract Dispute

Real Property

Eminent Domain/Inverse Condemnation (14)
Wrongful Eviction (33)
Other Real Property (e.g., quiet title) (26)
Writ of Possession of Real Property
Mortgage Foreclosure
Quiet Title
Other Real Property (*not eminent domain, landlord/tenant, or foreclosure*)

Unlawful Detainer

Commercial (31)
Residential (32)
Drugs (38) (*if the case involves illegal drugs, check this item; otherwise, report as Commercial or Residential*)

Judicial Review

Asset Forfeiture (05)
Petition Re: Arbitration Award (11)
Writ of Mandate (02)
Writ-Administrative Mandamus
Writ-Mandamus on Limited Court Case Matter
Writ-Other Limited Court Case Review
Other Judicial Review (39)
Review of Health Officer Order
Notice of Appeal-Labor
Commissioner Appeals

Provisionally Complex Civil Litigation (Cal. Rules of Court Rules 3.400-3.403)

Antitrust/Trade Regulation (03)
Construction Defect (10)
Claims Involving Mass Tort (40)
Securities Litigation (28)
Environmental/Toxic Tort (30)
Insurance Coverage Claims (*arising from provisionally complex case type listed above*) (41)

Enforcement of Judgment

Enforcement of Judgment (20)
Abstract of Judgment (Out of County)
Confession of Judgment (*non-domestic relations*)
Sister State Judgment
Administrative Agency Award (*not unpaid taxes*)
Petition/Certification of Entry of Judgment on Unpaid Taxes
Other Enforcement of Judgment Case

Miscellaneous Civil Complaint

RICO (27)
Other Complaint (*not specified above*) (42)
Declaratory Relief Only
Injunctive Relief Only (*non-harassment*)
Mechanics Lien
Other Commercial Complaint Case (*non-tort/non-complex*)
Other Civil Complaint (*non-tort/non-complex*)

Miscellaneous Civil Petition

Partnership and Corporate Governance (21)
Other Petition (*not specified above*) (43)
Civil Harassment
Workplace Violence
Elder/Dependent Adult Abuse
Election Contest
Petition for Name Change
Petition for Relief from Late Claim
Other Civil Petition

**SUMMONS
(CITACION JUDICIAL)**

FOR COURT USE ONLY
(SOLO PARA USO DE LA CORTE)

**NOTICE TO DEFENDANT: NAME OF PERSON/COMPANY YOU ARE SUING
(AVISO AL DEMANDADO):**

**SAMPLE
ONLY
Do not write
on this copy!**

**YOU ARE BEING SUED BY PLAINTIFF: YOUR NAME
(LO ESTÁ DEMANDANDO EL DEMANDANTE):**

NOTICE! You have been sued. The court may decide against you without your being heard unless you respond within 30 days. Read the information below.

You have 30 CALENDAR DAYS after this summons and legal papers are served on you to file a written response at this court and have a copy served on the plaintiff. A letter or phone call will not protect you. Your written response must be in proper legal form if you want the court to hear your case. There may be a court form that you can use for your response. You can find these court forms and more information at the California Courts Online Self-Help Center (www.courtinfo.ca.gov/selfhelp), your county law library, or the courthouse nearest you. If you cannot pay the filing fee, ask the court clerk for a fee waiver form. If you do not file your response on time, you may lose the case by default, and your wages, money, and property may be taken without further warning from the court.

There are other legal requirements. You may want to call an attorney right away. If you do not know an attorney, you may want to call an attorney referral service. If you cannot afford an attorney, you may be eligible for free legal services from a nonprofit legal services program. You can locate these nonprofit groups at the California Legal Services Web site (www.lawhelpcalifornia.org), the California Courts Online Self-Help Center (www.courtinfo.ca.gov/selfhelp), or by contacting your local court or county bar association. **NOTE:** The court has a statutory lien for waived fees and costs on any settlement or arbitration award of \$10,000 or more in a civil case. The court's lien must be paid before the court will dismiss the case. **¡AVISO!** Lo han demandado. Si no responde dentro de 30 días, la corte puede decidir en su contra sin escuchar su versión. Lea la información a continuación.

Tiene 30 DÍAS DE CALENDARIO después de que le entreguen esta citación y papeles legales para presentar una respuesta por escrito en esta corte y hacer que se entregue una copia al demandante. Una carta o una llamada telefónica no lo protegen. Su respuesta por escrito tiene que estar en formato legal correcto si desea que procesen su caso en la corte. Es posible que haya un formulario que usted pueda usar para su respuesta. Puede encontrar estos formularios de la corte y más información en el Centro de Ayuda de las Cortes de California (www.sucorte.ca.gov), en la biblioteca de leyes de su condado o en la corte que le quede más cerca. Si no puede pagar la cuota de presentación, pida al secretario de la corte que le dé un formulario de exención de pago de cuotas. Si no presenta su respuesta a tiempo, puede perder el caso por incumplimiento y la corte le podrá quitar su sueldo, dinero y bienes sin más advertencia.

Hay otros requisitos legales. Es recomendable que llame a un abogado inmediatamente. Si no conoce a un abogado, puede llamar a un servicio de remisión a abogados. Si no puede pagar a un abogado, es posible que cumpla con los requisitos para obtener servicios legales gratuitos de un programa de servicios legales sin fines de lucro. Puede encontrar estos grupos sin fines de lucro en el sitio web de California Legal Services, (www.lawhelpcalifornia.org), en el Centro de Ayuda de las Cortes de California, (www.sucorte.ca.gov) o poniéndose en contacto con la corte o el colegio de abogados locales. **AVISO:** Por ley, la corte tiene derecho a reclamar las cuotas y los costos exentos por imponer un gravamen sobre cualquier recuperación de \$10,000 ó más de valor recibida mediante un acuerdo o una concesión de arbitraje en un caso de derecho civil. Tiene que pagar el gravamen de la corte antes de que la corte pueda desechar el caso.

The name and address of the court is:
(El nombre y dirección de la corte es):

CASE NUMBER:
(Número del Caso):

LEAVE BLANK

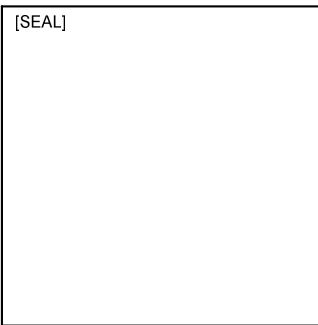
**SUPERIOR COURT OF CALIFORNIA, SANTA CLARA COUNTY
CHECK WITH STAFF**

The name, address, and telephone number of plaintiff's attorney, or plaintiff without an attorney, is:
(El nombre, la dirección y el número de teléfono del abogado del demandante, o del demandante que no tiene abogado, es):

YOUR NAME **YOUR PHONE #**
YOUR ADDRESS

DATE: _____ Clerk, by _____, Deputy
(Fecha) (Secretario) (Adjunto)

(For proof of service of this summons, use Proof of Service of Summons (form POS-010).)
(Para prueba de entrega de esta citación use el formulario Proof of Service of Summons, (POS-010)).



NOTICE TO THE PERSON SERVED: You are served

1. as an individual. **Check "1." if you are suing a person, not a company.**

2. as the person sued under the fictitious name of (specify):
3. on **Check "3." if you are suing a company, not an individual person. Select a box below that best identifies them/it.**

- under: CCP 416.10 (corporation) CCP 416.60 (minor)
- CCP 416.20 (defunct corporation) CCP 416.70 (conservatee)
- CCP 416.40 (association or partnership) CCP 416.90 (authorized person)

other (specify):
4. by personal delivery on (date):

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) :

FOR COURT USE ONLY

YOUR NAME
YOUR STREET ADDRESS
YOUR CITY, STATE, ZIP CODE

TELEPHONE NO.: **YOUR PHONE #** FAX NO. (Optional) :

E-MAIL ADDRESS (Optional):

ATTORNEY FOR (Name): **IN PRO PER**

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA

STREET ADDRESS: **CHECK WITH STAFF**

MAILING ADDRESS:

CITY AND ZIP CODE:

BRANCH NAME: **CIVIL**

PLAINTIFF: **YOUR NAME**

DEFENDANT: **PERSON/COMPANY YOU ARE SUING**

DOES 1 TO **5**

COMPLAINT-Personal Injury, Property Damage, Wrongful Death

AMENDED (Number) :

Type (check all that apply) :

- MOTOR VEHICLE** **OTHER (specify) :**
- Property Damage** **Wrongful Death**
- Personal Injury** **Other Damages (specify) :**

CHECK ALL THE BOXES THAT APPLY

Jurisdiction (check all that apply) :

ACTION IS A LIMITED CIVIL CASE

Amount demanded ~~does not exceed \$10,000~~ ~~exceeds \$10,000, but does not exceed \$25,000~~ CHECK THE CORRECT BOX

ACTION IS AN UNLIMITED CIVIL CASE (exceeds \$25,000)

ACTION IS RECLASSIFIED by this amended complaint

- from limited to unlimited**
- from unlimited to limited**

CASE NUMBER:

LEAVE BLANK

1. Plaintiff (name or names): **YOUR NAME**

alleges causes of action against defendant (name or names): **PERSON/COMPANY YOU ARE SUING**

2. This pleading, including attachments and exhibits, consists of the following number of pages: **#**

3. Each plaintiff named above is a competent adult

a. **except** plaintiff (name) :

- (1) a corporation qualified to do business in California
- (2) an unincorporated entity (describe) :
- (3) a public entity (describe) :
- (4) a minor an adult
 - (a) for whom a guardian or conservator of the estate or a guardian ad litem has been appointed
 - (b) other (specify) :
- (5) other (specify) :

IF YOU ARE SUING A PERSON, NOT A COMPANY, LEAVE "3(a)" AND "3(b)" BLANK

IF YOU ARE SUING A COMPANY(IES), FILL IN ITEM "3(a)" AND/OR "3(b)" WITH INFORMATION ABOUT THE COMPANY(IES)

b. **except** plaintiff (name) :

- (1) a corporation qualified to do business in California
- (2) an unincorporated entity (describe) :
- (3) a public entity (describe) :
- (4) a minor an adult
 - (a) for whom a guardian or conservator of the estate or a guardian ad litem has been appointed
 - (b) other (specify) :
- (5) other (specify) :

Information about additional plaintiffs who are not competent adults is shown in Attachment 3.

SHORT TITLE:

YOUR NAME vs. PERSON/COMPANY YOU ARE SUING

CASE NUMBER:

LEAVE BLANK

4. Plaintiff (*name*):
is doing business under the fictitious name (*specify*):

and has complied with the fictitious business name laws

5. Each defendant named above is a natural

**SKIP THIS QUESTION IF YOU ARE SUING
A PERSON, NOT A COMPANY**

a. **except** defendant (*name*):

- (1) a business organization, form unknown
- (2) a corporation
- (3) an unincorporated entity (*describe*):
- (4) a public entity (*describe*):
- (5) other (*specify*):

- (1) a business organization, form unknown
- (2) a corporation
- (3) an unincorporated entity (*describe*):
- (4) a public entity (*describe*):
- (5) other (*specify*):

b. **except** defendant (*name*):

- (1) a business organization, form unknown
- (2) a corporation
- (3) an unincorporated entity (*describe*):
- (4) a public entity (*describe*):
- (5) other (*specify*):

d. **except** defendant (*name*):

- (1) a business organization, form unknown
- (2) a corporation
- (3) an unincorporated entity (*describe*):
- (4) a public entity (*describe*):
- (5) other (*specify*):

Information about additional defendants who are not natural persons is contained in Attachment 5.

CHECK WITH STAFF

6. The true names of defendants sued as Does are unknown to plaintiff.

- a. Doe defendants (*specify Doe numbers*): _____ were the agents or employees of other named defendants and acted within the scope of that agency or employment.
- b. Doe defendants (*specify Doe numbers*): _____ are persons whose capacities are unknown to plaintiff.

7. Defendants who are joined under Code of Civil Procedure section 382 are (*names*):

8. This court is the proper court because

- a. at least one defendant now resides in its jurisdictional area.
- b. the principal place of business of a defendant corporation or unincorporated association is in its jurisdictional area.
- c. injury to person or damage to personal property occurred in its jurisdictional area.
- d. other (*specify*):

CHECK WITH STAFF

9. Plaintiff is required to comply with a claims statute, **and**

- a. has complied with applicable claims statutes, **or**
- b. is excused from complying because (*specify*):

SHORT TITLE:
YOUR NAME vs. PERSON/COMPANY YOU ARE SUING

CASE NUMBER:
LEAVE BLANK

10. The following causes of action are attached and the statements above apply to each *(each complaint must have one or more causes of action attached)* :

- a. Motor Vehicle
- b. General Negligence
- c. Intentional Tort
- d. Products Liability
- e. Premises Liability
- f. Other *(specify)* :

CHECK ALL THAT APPLY. REMEMBER THAT YOU MUST HAVE A "CAUSE OF ACTION" FORM FOR EVERY ITEM YOU HAVE CHECKED.

11. Plaintiff has suffered

- a. wage loss
- b. loss of use of property
- c. hospital and medical expenses
- d. general damage
- e. property damage
- f. loss of earning capacity
- g. other damage *(specify)* :

CHECK ALL THAT APPLY

CHECK "g." IF YOU WANT TO ASK FOR PUNITIVE DAMAGES

12. The damages claimed for wrongful death and the relationships of plaintiff to the deceased are

- a. listed in Attachment 12.
- b. as follows:

13. The relief sought in this complaint is within the jurisdiction of this court.

14. **Plaintiff prays** for judgment for costs of suit; for such relief as is fair, just, and equitable; and for

- a. (1) compensatory damages **CHECK ONLY IF YOU WANT PUNITIVE DAMAGES**
- (2) punitive damages

The amount of damages is *(in cases for personal injury or wrongful death, you must check (1))*:

- (1) according to proof **HOW MUCH ARE YOU SUING FOR?**
- (2) in the amount of: \$

15. The paragraphs of this complaint alleged on information and belief are as follows *(specify paragraph numbers)* :
IF ANY STATEMENTS IN YOUR CAUSE(S) OF ACTION ARE BASED ON BELIEF, NOT YOUR OWN FIRST - HAND KNOWLEDGE, WRITE THOSE PARAGRAPH NUMBERS HERE.

Date: **TODAY'S DATE**

PRINT YOUR NAME

(TYPE OR PRINT NAME)

▶ **SIGN YOUR NAME**

(SIGNATURE OF PLAINTIFF OR ATTORNEY)

SHORT TITLE:

YOUR NAME vs. PERSON/COMPANY YOU ARE SUING

CASE NUMBER:

LEAVE BLANK

FIRST, SECOND, THIRD, etc. **CAUSE OF ACTION- Motor Vehicle**
(number)

ATTACHMENT TO Complaint Cross-Complaint
(Use a separate cause of action form for each cause of action)

****NOTE: USE THIS FORM ONLY IF YOUR INJURY RESULTED FROM AN AUTOMOBILE ACCIDENT. OTHERWISE, RIP THIS PAGE OUT.**

Plaintiff (name): **YOUR NAME**

MV-1. Plaintiff alleges the acts of defendants were negligent; the acts were the legal (proximate) cause of injuries and damages to plaintiff; the acts occurred

on (date):

at (place):

MV-2. DEFENDANTS

a. The defendants who operated a motor vehicle are (names):
NAME AND ADDRESS OF DRIVER

Does _____ to _____

b. The defendants who employed the persons who operated a motor vehicle in the course of their employment are (names): **CHECK "b." AND WRITE NAME AND ADDRESS OF COMPANY IF DRIVER WAS DRIVING A COMPANY-OWNED VEHICLE**

Does _____ to _____

c. The defendants who owned the motor vehicle which was operated with their permission are (names):
CHECK "c." AND WRITE NAME OF OWNER OF VEHICLE, IF DIFFERENT FROM PERSON IN "A."

Does _____ to _____

d. The defendants who entrusted the motor vehicle are (names):
CHECK "d." IF YOU ANSWERED "b." OR "c.", WRITE THE NAME(S) FROM "b." AND "c." HERE

Does _____ to _____

e. The defendants who were the agents and employees of the other defendants and acted within the scope of the agency were (names):

CHECK "e." AND FILL IN THIS SECTION IF IT APPLIES.

Does _____ to _____

f. The defendants who are liable to plaintiffs for other reasons and the reasons for the liability are
 listed in Attachment MV-2f as follows:

SEE A PRIVATE ATTORNEY IF YOU HAVE QUESTIONS REGARDING "f."

Does _____ to _____

SHORT TITLE:

YOUR NAME vs. PERSON/COMPANY YOU ARE SUING

CASE NUMBER:

LEAVE BLANK

FIRST, SECOND, THIRD, etc. **CAUSE OF ACTION- General Negligence** Page _____

(number)

ATTACHMENT TO Complaint Cross-Complaint

(Use a separate cause of action form for each cause of action.)

GN-1. Plaintiff (name) : **YOUR NAME**

**** NOTE: USE THIS FORM ONLY IF THE PERSON YOU ARE SUING COMMITTED A CARELESS OR NEGLIGENT ACT (AS OPPOSED TO AN INTENTIONAL ACT) IN A SITUATION OTHER THAN A CAR OR PREMISES LIABILITY ACCIDENT. OTHERWISE RIP THIS PAGE OUT.**

alleges that defendant (name): **PERSON/COMPANY YOU ARE SUING**

Does _____ to _____

was the legal (proximate) cause of damages to plaintiff. By the following acts or omissions to act, defendant negligently caused the damage to plaintiff

on (date) **← DATE THAT YOU OR YOUR PROPERTY WHERE INJURED/DAMAGED**
at (place) **← WHERE DID THE INJURY TAKE PLACE?**

(description of reasons for liability) :

DESCRIBE WHAT HAPPENED THAT LED TO YOUR INJURY AND/OR DAMAGE TO YOUR PROPERTY. EXPLAIN HOW THE PERSON YOU ARE SUING IS RESPONSIBLE FOR CAUSING THIS.

SHORT TITLE:
YOUR NAME vs. PERSON/COMPANY YOU ARE SUIING

CASE NUMBER
LEAVE BLANK

FIRST, SECOND, THIRD, etc. **CAUSE OF ACTION- Intentional Tort**

Page

(number)
ATTACHMENT TO Complaint Cross-Complaint

****NOTE: USE THIS FORM ONLY IF YOU FEEL THE PERSON YOU ARE SUIING INTENTIONALLY CAUSED YOUR INJURY. OTHERWISE, RIP THIS PAGE OUT.**

(Use a separate cause of action form for each cause of action.)

IT-1. Plaintiff (name): **YOUR NAME**

alleges that defendant (name) : **PERSON/COMPANY YOU ARE SUIING**

Does _____ to _____

was the legal (proximate) cause of damages to plaintiff. By the following acts or omissions to act, defendant intentionally caused the damage to plaintiff

on (date): **DATE THAT YOU AND/OR YOUR PROPERTY WERE INJURED/DAMAGED**

at (place): **WHERE DID YOUR INJURY TAKE PLACE?**

(description of reasons for liability):

DESCRIBE WHAT HAPPENED THAT LED TO YOUR INJURY AND/OR DAMAGE TO YOUR PROPERTY. DESCRIBE HOW THE PERSON YOU ARE SUIING INTENTIONALLY CAUSED YOUR INJURY OR PROPERTY DAMAGE.

SHORT TITLE:

YOUR NAME VS PERSON/COMPANY YOU ARE SUING

CASE NUMBER:

LEAVE BLANK

FIRST, SECOND, THIRD, etc. CAUSE OF ACTION - Premises Liability

Page _____

(number)

ATTACHMENT TO Complaint Cross-Complaint
(Use a separate cause of action form for each cause of action.)

NOTE: USE THIS FORM IF YOU WERE INJURED AT A BUSINESS OR HOME. OTHERWISE, RIP THIS PAGE OUT.

Prem.L-1. Plaintiff (name): **YOUR NAME**

alleges the acts of defendants were the legal (proximate) cause of damages to plaintiff.

On (date): **DATE OF INJURY** plaintiff was injured on the following premises in the following

fashion (description of premises and circumstances of injury):

DESCRIBE HOW YOU WERE INJURED

Prem.L-2. **Count One-Negligence** The defendants who negligently owned, maintained, managed and operated the described premises were (names):
NAME OF OWNER OR MANAGER OF PROPERTY

Does 1 to 5

Prem.L-3. **Count Two-Willful Failure to Warn** [Civil Code section 846] The defendant owners who willfully or maliciously failed to guard or warn against a dangerous condition, use, structure, or activity were (names): **(TALK TO A PRIVATE ATTORNEY IF YOU ARE UNSURE ABOUT THIS)**

Does _____ to _____
Plaintiff, a recreational user, was an invited guest a paying guest.

Prem.L-4. **Count Three-Dangerous Condition of Public Property** The defendants who owned public property on which a dangerous condition existed were (names):
(TALK TO A PRIVATE ATTORNEY IF YOU ARE UNSURE ABOUT THIS)

Does _____ to _____
a. The defendant public entity had actual constructive notice of the existence of the dangerous condition in sufficient time prior to the injury to have corrected it.
b. The condition was created by employees of the defendant public entity.

Prem.L-5. a. **Allegations about Other Defendants** The defendants who were the agents and employees of the other defendants and acted within the scope of the agency were (names):
NAME OF EMPLOYEE(S) THAT CAUSED THE INJURY

Does 1 to 5
b. The defendants who are liable to plaintiffs for other reasons and the reasons for their liability are described in attachment Prem.L-5.b as follows (names):

(TALK TO A PRIVATE ATTORNEY IF YOU ARE UNSURE ABOUT THIS)

SHORT TITLE:

YOUR NAME vs. PERSON/COMPANY YOU ARE SUING

CASE NUMBER:

LEAVE BLANK

Exemplary Damages Attachment

Page

****NOTE: USE THIS ONLY WHERE THE PERSON YOU ARE SUING ACTED OUTRAGEOUSLY TO CAUSE YOUR INJURY, SPECIFICALLY, USE THIS ONLY IF THE DEFENDANT ACTED OUT OF MALICE, FRAUD OR OPPRESSION (ASK STAFF IF YOU NEED ASSISTANCE). OTHERWISE, RIP THIS FORM OUT.**

ATTACHMENT TO Complaint Cross-Complaint

EX-1. As additional damages against defendant (name):
PERSON/COMPANY YOU ARE SUING

Plaintiff alleges defendant was guilty of

- malice
- fraud
- oppression

as defined in Civil Code section 3294, and plaintiff should recover, in addition to actual damages, damages to make an example of and to punish defendant.

EX-2. The facts supporting plaintiff's claim are as follows:

EXPLAIN HOW THE PERSON YOU ARE SUING ACTED OUT OF MALICE, FRAUD OR OPPRESSION.

MALICE: DEFENDANT INTENDED TO MISREPRESENT OR HIDE AN IMPORTANT FACT THAT HE/SHE KNEW ABOUT, WITH THE INTENTION OF HARMING YOU OR TAKING ADVANTAGE OF YOU.

OPPRESSION: DEFENDANT INTENTIONALLY SUBJECTED YOU TO CRUEL AND UNJUST HARDSHIP IN CONSCIOUS DISREGARD OF YOUR RIGHTS.

EX-3. The amount of exemplary damages sought is

- a. not shown, pursuant to Code of Civil Procedure section 425.10.
- b. \$

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) :

Your Name
Your Street Address
Your City, State and Zip

TELEPHONE NO.: Your Phone#

FAX NO. (Optional):

E-MAIL ADDRESS (Optional):

ATTORNEY FOR (Name): IN PRO PER

SUPERIOR COURT OF CALIFORNIA, COUNTY OF Santa Clara

STREET ADDRESS: Check with Staff

MAILING ADDRESS:

CITY AND ZIP CODE:

BRANCH NAME: Civil

PLAINTIFF/PETITIONER: Your Name

DEFENDANT/RESPONDENT: Name of person or company you are suing

SAMPLE
ONLY
Do not write
on this copy!

CASE NUMBER:

Leave Blank

PROOF OF SERVICE OF SUMMONS

Ref. No. or File No.:

(Separate proof of service is required for each party served.)

1. At the time of service I was at least 18 years of age and not a party to this action.

2. I served copies of:

- a. summons
- b. complaint
- c. Alternative Dispute Resolution (ADR) package
- d. Civil Case Cover Sheet (served in complex cases only)
- e. cross-complaint

****NOTE: STOP HERE: THE PERSON WHO SERVES YOUR PAPERS WILL FILL OUT THE REST OF THIS FORM.**

3. NAME OF PERSON/COMPANY YOU ARE SUING

b. Person (other than the party in item 3a) served on behalf of an entity or as an authorized agent (and not a person under item 5b on whom substituted service was made) (specify name and relationship to the party named in item 3a):

4. Address where the party was served ← **WRITE THE ADDRESS WHERE THE PERSON YOU ARE SUING WAS GIVEN THE FORMS**

5. I served the party by **CHECK THE BOX "5.a." AND FILL IN THE DATE AND THE TIME THE OTHER PARTY WAS HANDED THE FORMS**

- a. **by personal service.** I personally delivered the documents listed in item 2 to the party or a person authorized to receive service of process for the party (1) on (date) : DATE SERVED (2) at (time) : TIME SERVED
- b. **by substituted service.** On (date) : at (time) : I left the documents listed in item 2 with or in the presence of (name and title or relationship to person indicated in item 3) :

- (1) **(business)** a person at least 18 years of age apparently in charge at the office or usual place of business of the person to be served. I informed him or her of the general nature of the papers.
- (2) **(home)** a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the party. I informed him or her of the general nature of the papers.
- (3) **(physical address unknown)** a person at least 18 years of age apparently in charge at the usual mailing address of the person to be served, other than a United States Postal Service post office box. I informed him or her of the general nature of the papers.
- (4) I thereafter mailed (by first-class, postage prepaid) copies of the documents to the person to be served at the place where the copies were left (Code Civ. Proc., § 415.20). I mailed the documents on (date) : from (city): or a declaration of mailing is attached.
- (5) I attach a **declaration of diligence** stating actions taken first to attempt personal service.

PLAINTIFF/PETITIONER: Your Name

CASE NUMBER:

Leave Blank

DEFENDANT/RESPONDENT: Name of person or company you are suing

5. c. **by mail and acknowledgment of receipt of service.** I mailed the documents listed in item 2 to the party, to the address shown in item 4, by first-class mail, postage prepaid,
- (1) on (date) : (2) from (city) :
- (3) with two copies of the *Notice and Acknowledgment of Receipt* and a postage-paid return envelope addressed to me. (*Attach completed Notice and Acknowledgment of Receipt.*) (Code Civ. Proc., § 415.30.)
- (4) to an address outside California with return receipt requested. (Code Civ. Proc., § 415.40.)
- d. **by other means** (*specify means of service and authorizing code section*) :

Additional page describing service is attached.

6. The "Notice to the Person Served" (on the summons) was completed as follows:

- a. as an individual defendant.
- b. as the person sued under § 415.10.
- c. as occupant.
- d. On behalf of (specify) :

Check the box that applies to your case
(this needs to match your Summons)

under the following Code of Civil Procedure section:

- | | |
|---|---|
| <input type="checkbox"/> 416.10 (corporation) | <input type="checkbox"/> 415.95 (business organization, form unknown) |
| <input type="checkbox"/> 416.20 (defunct corporation) | <input type="checkbox"/> 416.60 (minor) |
| <input type="checkbox"/> 416.30 (joint stock company/association) | <input type="checkbox"/> 416.70 (ward or conservatee) |
| <input type="checkbox"/> 416.40 (association or partnership) | <input type="checkbox"/> 416.90 (authorized person) |
| <input type="checkbox"/> 416.50 (public entity) | <input type="checkbox"/> 415.46 (occupant) |
| | <input type="checkbox"/> other: |

7. **Person who served papers**

- a. Name: NAME OF THE PERSON WHO SERVED THE PAPERS FOR YOU
- b. Address: SERVER'S ADDRESS (NOT YOURS!)
- c. Telephone number: SERVER'S TELEPHONE NUMBER
- d. **The fee** for service was: \$

e. I am:

- (1) not a registered California process server
- (2) exempt from registration as a process server
- (3) registered California process server
- (i) owner employee independent contractor.
- (ii) Registration No.:
- (iii) County:

Server checks the box that applies to them

8. **I declare** under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

9. **I am a California sheriff or marshal and** I certify that the foregoing is true and correct.

Date: DATE SIGNED

SERVER PRINTS NAME

(NAME OF PERSON WHO SERVED PAPERS/SHERIFF OR MARSHAL)

SERVER SIGNS NAME

(SIGNATURE)

- DO NOT FILE WITH THE COURT -
- UNLESS YOU ARE APPLYING FOR A DEFAULT JUDGMENT UNDER CODE OF CIVIL PROCEDURE § 585 -

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address) : <p style="text-align: center;">YOUR PHONE #</p> <p>YOUR NAME YOUR ADDRESS</p>	TELEPHONE NO.: FOR COURT USE ONLY
ATTORNEY FOR (Name) : SELF-REPRESENTED SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA STREET ADDRESS: CHECK WITH STAFF MAILING ADDRESS: 191 N. FIRST STREET CITY AND ZIP CODE: SAN JOSE, CA 95113 BRANCH NAME: FAMILY	<div style="border: 2px solid black; padding: 10px; font-weight: bold; font-size: 1.2em;"> DO NOT FILL OUT THIS FORM IF YOU ARE SUING FOR PROPERTY DAMAGE </div>
PLAINTIFF: YOUR NAME DEFENDANT: PERSON/COMPANY YOU ARE SUING	CASE NUMBER: YOUR CASE NUMBER
STATEMENT OF DAMAGES (Personal Injury or Wrongful Death)	

To (name of one defendant only) : **PERSON/COMPANY YOU ARE SUING**
 Plaintiff (name of one plaintiff only) : **YOUR NAME**
 seeks damages in the above-entitled action, as follows:

	AMOUNT
1. General damages	
a. <input type="checkbox"/> Pain, suffering, and inconvenience.....	\$ _____
b. <input type="checkbox"/> Emotional distress.....	\$ _____
c. <input type="checkbox"/> Loss of consortium.....	\$ _____
d. <input type="checkbox"/> Loss of society and companionship (wrongful death actions only).....	\$ _____
e. <input type="checkbox"/> Other (specify).....	\$ _____
f. <input type="checkbox"/> Other (specify).....	\$ _____
g. <input type="checkbox"/> Continued on Attachment 1.g.	
2. Special damages	
a. <input type="checkbox"/> Medical expenses (to date).....	\$ _____
b. <input type="checkbox"/> Future medical expenses (present value).....	\$ _____
c. <input type="checkbox"/> Loss of earnings (to date).....	\$ _____
d. <input type="checkbox"/> Loss of future earning capacity (present value).....	\$ _____
e. <input type="checkbox"/> Property damage.....	\$ _____
f. <input type="checkbox"/> Funeral expenses (wrongful death actions only).....	\$ _____
g. <input type="checkbox"/> Future contributions (present value) (wrongful death actions only).....	\$ _____
h. <input type="checkbox"/> Value of personal service, advice, or training (wrongful death actions only).....	\$ _____
i. <input type="checkbox"/> Other (specify).....	\$ _____
j. <input type="checkbox"/> Other (specify).....	\$ _____
k. <input type="checkbox"/> Continued on Attachment 2.k.	
3. <input type="checkbox"/> Punitive damages: Plaintiff reserves the right to seek punitive damages in the amount of (specify) \$ _____ when pursuing a judgment in the suit filed against you.	

Date: TODAY'S DATE

PRINT YOUR NAME
(TYPE OR PRINT NAME)

(Proof of service on reverse)

SIGN YOUR NAME

(SIGNATURE OF PLAINTIFF OR ATTORNEY FOR PLAINTIFF)

PLAINTIFF: **YOUR NAME**

CASE NUMBER:

YOUR CASE NUMBERDEFENDANT: **PERSON/COMPANY YOU ARE SUING****PROOF OF SERVICE**

(After having the other party served as described below, with any of the documents identified in item 1, have the person who served the documents complete this Proof of Service. Plaintiff cannot serve these papers.)

1. I served the

a. Statement of Damages Other (specify) :

b. on (name) :

c. by serving defendant other (name and title or relationship to person served) :d. by delivery at home at business

(1) date:

(2) time:

(3) address:

e. by mailing

(1) date:

(2) place:

2. Manner of service (check proper box) :

a. **Personal service.** By personally delivering copies. (CCP § 415.10)b. **Substituted service on corporation, unincorporated association (including partnership), or public entity.** By leaving, during usual office hours, copies in the office of the person served with the person who apparently was in charge and thereafter mailing (by first-class mail, postage prepaid) copies to the person served at the place where the copies were left. (CCP § 415.20(a))c. **Substituted service on natural person, minor, conservatee, or candidate.** By leaving copies at the dwelling house, usual place of abode, or usual place of business of the person served in the presence of a competent member of the household or a person apparently in charge of the office or place of business, at least 18 years of age, who was informed of the general nature of the papers, and thereafter mailing (by first-class mail, postage prepaid) copies to the person served at the place where the copies were left. (CCP § 415.20 (b)) (**Attach separate declaration or affidavit stating acts relied on to establish reasonable diligence in first attempting personal service.**)d. **Mail and acknowledgment service.** By mailing (by first-class mail or airmail, postage prepaid) copies to the person served, together with two copies of the form of notice and acknowledgment and a return envelope, postage prepaid, addressed to the sender. (CCP § 415.30) (**Attach completed acknowledgment of receipt.**)e. **Certified or registered mail service.** By mailing to an address outside California (by first-class mail, postage prepaid, requiring a return receipt) copies to the person served. (CCP § 415.40) (**Attach signed return receipt or other evidence of actual delivery to the person served.**)f. Other (specify code section) : additional page is attached.

3. At the time of service I was at least 18 years of age and not a party to this action.

4. Fee for service: \$

5. Person serving:

a. California sheriff, marshal, or constableb. Registered California process serverc. Employee or independent contractor of a registered California process serverd. Not a registered California process servere. Exempt from registration under Bus. & Prof. Code § 22350(b)

f. Name, address, and telephone number and, if applicable, county of registration and number:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(For California sheriff, marshal or constable use only)

I certify that the foregoing is true and correct.

Date:

(SIGNATURE)

(SIGNATURE)