

This form is attached to form _____ item 1 or 2.

1 If more than two plaintiffs (person, business, or entity suing), list their information below:

Other plaintiff's name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Email address (if available): _____

Is this plaintiff doing business under a fictitious name? Yes No *If yes, attach form*

Other plaintiff's name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Email address (if available): _____

Is this plaintiff doing business under a fictitious name? Yes No *If yes, attach form*

Check here if more than four plaintiffs and fill out and attach another form

2 If more than two defendants (person being sued), list their information below:

Other defendant's name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Other defendant's name: _____ Phone: _____

Street address: _____
Street City State Zip

Mailing address (if different): _____
Street City State Zip

Check here if your case is against more than four defendants and fill out and attach another form

3 I understand that by filing a claim in small claims court, I have no right to appeal this claim.

I declare under penalty of perjury under the laws of the State of California that the information above and on any attachments to this form is true and correct.

Date: _____

Type or print your name

Date: _____

Type or print your name



Sign your name



Sign your name