

STATEMENT OF CLAIM

CASE NO. _____

State of Louisiana
Parish of LAFOURCHE
Ward 10, JP District 4

JUSTICE OF THE PEACE COURT
16358 WEST AVE "A", POB 16,
GALLIANO, Louisiana 70354
(985) 691-2175

Plaintiff(s): _____ Phone No. _____

Address: _____

Defendant(s): _____

Address: _____

Suit Amount: _____ Dollars \$ _____

Plus _____ Interest _____ Court Costs _____ Attorney Fees

Suit On: _____ Damages to Rental Property _____ Past Due Rent _____ Promissory Note

_____ NSF Check _____ Open Account _____ Money Claim

_____ Other: _____

Date Indebtedness occurred: _____

Give a written explanation of your claim below. Attach any further explanation. If more room is needed, attach a separate sheet.

PLAINTIFF(S) HEREBY AFFIRM THAT THE FACTS AND DOCUMENTS SUBMITTED IN THIS CLAIM ARE TRUE AND CORRECT TO THE BEST OF HIS/HER KNOWLEDGE, INFORMATION AND BELIEF.

Date Filed: _____

Signature

NOTICE TO ALL PARTIES: DURING THE PENDENCY OF THIS LAWSUIT, THE COURT WILL CONTACT YOU AT THE ABOVE ADDRESS AND/OR TELEPHONE NUMBER YOU HAVE PROVIDED. IF EITHER ADDRESS OR TELEPHONE NUMBER SHOULD CHANGE YOU MUST NOTIFY THE COURT IMMEDIATELY.