

Sylvania Municipal Court
Michael A. Bonfiglio
Civil/Small Claims Division

Small Claims Complaint

Plaintiff (s):

Date:

Case No.

Phone:

Vs.

Phone:

Military Status of the Defendant: _____

Amount of Claim: _____ Plus Costs of _____

Nature of Claim:

Plaintiff's Signature

Sworn to and subscribed in my presence this _____ day of _____, 20_____.

Court Date: _____ @ _____