

Case No. JS _____ - _____ A

Plaintiff(s)

vs.

1st Defendant

2nd Defendant

3rd Defendant

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§

In the Justice Court
Precinct 3, Place 1
County of Dallas
State of Texas

Small Claims Petition

(For all addresses, you MUST include number, street, apartment number, city, state, & zip code.)

NOW COMES the above named Plaintiff(s) in the above entitled and numbered cause complaining of the above named Defendant(s), who can be notified and/or served with citation at the following address:

1st Defendant's address:

ADDRESS and APT or SUITE NO.

CITY STATE ZIP

OTHER, if any

PHONE _____ FAX _____

Check to indicate service on Registered Agent

Registered agent for service of 1st Defendant

NAME _____

ADDRESS _____

CITY STATE ZIP _____

OTHER _____

PHONE _____ FAX _____

2nd Defendant's address:

ADDRESS and APT or SUITE NO.

CITY STATE ZIP

OTHER, if any

PHONE _____ FAX _____

Check to indicate service on Registered Agent

Registered agent 2nd Defendant

NAME _____

ADDRESS _____

CITY STATE ZIP _____

OTHER _____

PHONE _____ FAX _____

3rd Defendant's address:

ADDRESS and APT or SUITE NO.

CITY STATE ZIP

OTHER, if any

PHONE _____ FAX _____

Check to indicate service on Registered Agent

Registered agent 3rd Defendant

NAME _____

ADDRESS _____

CITY STATE ZIP _____

OTHER _____

PHONE _____ FAX _____

Defendant(s) is/are justly indebted to Plaintiff(s) for *return of the following* described property:

_____ valued at \$ _____.

OR

Defendant(s) is/are justly indebted to Plaintiff(s) in the sum of \$ _____ for the following reason(s):

AND there are no counterclaims existing in favor of Defendant(s) against Plaintiff(s) except: _____

Plaintiff(s) request(s) a judgment for a sum of money against Defendant(s), plus pre-judgment interest, plus reasonable attorney fees, plus all costs of court, plus post-judgment interest at the highest legal rate.

X _____
Signature of Plaintiff, Plaintiff's authorized agent,

X _____
Signature of Plaintiff's Attorney (if applicable)

Address and Apartment or Suite No.

Attorney Address and Suite No.

City State Zip

Attorney City Attorney State Attorney Zip

PHONE _____ FAX _____

PHONE _____ FAX _____

Bar Card # _____

_____ *(initial)* I consent to email service of the answer and any other motions or pleadings, to my email address:

Email address