\$0000.00- \$1500.00= \$30

Plaintiff (list names):

\$1500.01-\$5000.00= \$50 \$5000.01-\$10000.00=\$75

If have filed more than 12 cases= \$100

-File with Court then serve

- Cannot be served by Plaintiff

Case Number:	

Name: Jane Do	e		Phone: 2	<u>13-333-123</u>	4
Street address:	123 Main Street		Los Angeles	CA	90012
3 2 191	Street		City	State	Zip
Mailing addres	s (if different): Street		City	<u></u>	·
If we are the ar		mlaimtiff have	Спу	State	Zip
	one plaintiff, list next	-	Phone:		
Street address:			rnone: _		
Succi address.	Street		City	State	
Mailing addres	s (if different):				
	Street		City	State	Zip
	if more than two plaintiffs as	-		X	
	if either plaintiff listed above				-
	if any plaintiff is a "licensee	e" or "deferred depos	sit originator" (pay	day lender)	under Financi
Code section	ons 23000 et seq.		1,50		
The defenda	ant (the person, busine	ess, or public en	tity being sued) is:	
Name: John Sn	nith		Phone:		
Street address:	456 White Oak Ave.		Los Angeles	CA	90018
Street address.					
	Street		City	State	Zip
	Street s (if different):	MPND			
Mailing address	Street s (if different): Street	Sh W	City	State	Zip
Mailing address	Street s (if different): Street dant is a corporation, l	imited liability co	City	State	Zip
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Mailing address If the defend or agent aut Name: Address: Street Check here	Street s (if different): Street dant is a corporation, I thorized for service of if your case is against more if any defendant is on active	imited liability coprocess here: Job City than one defendant, a military duty, and we	City company, or pub title, if known: Stand attach form SC rite his or her name	State Plic entity ate Zip -100A. here:	Zip r, list the per
Mailing address If the defend or agent aut Name: Address: Street Check here	Street s (if different): Street dant is a corporation, I thorized for service of if your case is against more	imited liability coprocess here: Job City than one defendant, a military duty, and we	City company, or pub title, if known: Stand attach form SC rite his or her name	State Plic entity ate Zip -100A.	Zip r, list the per
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Mailing address If the defend or agent aut Name: Address: Street Check here Check here The plaintiff a. Why does to John Smith When did to	Street s (if different): Street dant is a corporation, I chorized for service of if your case is against more if any defendant is on active claims the defendant borrowed \$1,200.00 from methic happen? (Date): 01/13/20	imited liability coprocess here: Job City than one defendant, of military duty, and we owes \$ 1,200 ff money? e and never paid me	City company, or pub title, if known: Stand attach form SC rite his or her name . (Expl	State State State Olic entity ate Zip -100A. c here: dain below):	Zip r, list the per
Mailing address If the defend or agent aut Name: Address: Street Check here Check here The plaintiff a. Why does to John Smith When did to b. If no specifications	Street s (if different): Street dant is a corporation, I chorized for service of if your case is against more if any defendant is on active claims the defendant he defendant owe the plaintif borrowed \$1,200.00 from methis happen? (Date): 01/13/20 fic date, give the time period:	imited liability coprocess here: Job City than one defendant, of military duty, and words 1,200 ff money? e and never paid me Date started:	City company, or pub title, if known: Stand attach form SC rite his or her name (Expli	State State State olic entity ate Zip -100A. chere: ain below):	Zip r, list the per
Mailing address If the defend or agent aut Name: Address: Street Check here Check here The plaintiff a. Why does to John Smith When did to b. If no specific. How did you	Street s (if different): Street dant is a corporation, I chorized for service of if your case is against more if any defendant is on active claims the defendant borrowed \$1,200.00 from methic happen? (Date): 01/13/20	imited liability coprocess here: Job City than one defendant, of military duty, and words 1,200 ff money? e and never paid me Date started:	City company, or pub title, if known: Stand attach form SC rite his or her name (Expli	State State State olic entity ate Zip -100A. chere: ain below):	Zip r, list the per

Plaintiff (list names):			Case Number:
sue. If your o	k the defendant (in person, in write laim is for possession of propert . Have you done this?		
This courthouse a. (1) When (2) When	filing your claim at this courthouse covers the area (check the one that applies re the defendant lives or does business. The the plaintiff's property was damaged. The the plaintiff was injured.	(4) Where a co signed, per where the c	ontract (written or spoken) was made, formed, or broken by the defendant or defendant lived or did business when the made the contract.
is about <i>§ 395(b)</i> c. ☐ Where th	ne buyer signed the contract, lives now, or	s now, or lived we r household good lived when the c	when the contract was made, if this claim, ds, services, or loans. (Code Civ. Proc., contract was made, if this claim is about a
d. Where the	tallment contract (like a credit card). (Civ ne buyer signed the contract, lives now, or ntly garaged, if this claim is about a vehicl pecify):	lived when the c	ontract was made, or where the vehicle is
6 List the zip c	ode of the place checked in (5) al	ove (if you kn	ow): 90018
7 Is your claim If yes, and if you 8 Are you suin	about an attorney-client fee disp have had arbitration, fill out form SC-101 g a public entity? Yes No file a written claim with the entity first.	oute? Yes	X No s form, and check here: ☐
9 Have you file	ty denies your claim or does not answer word more than 12 other small claim To If yes, the filing fee for this case will	s within the	•
If yes, I have not California durin	for more than \$2,500? \(\times\) Yes filed, and understand that I cannot file, m g this calendar year. that by filing a claim in small cla		
I declare, under penalt form is true and correct		at the informatio	n above and on any attachments to this
Date: 05/24/2018	Jane Doe Plaintiff types or prints name here		Plqimiff signs here
Date:	Second plaintiff types or prints name	here	Second plaintiff signs here
Ass	quests for Accommodations sistive listening systems, computer-assisted vices are available if you ask at least five d	I real-time caption	oning, or sign language interpreter ial. Contact the clerk's office for form

Revised Jenuary 1, 2020

MC-410, Request for Accommodations by Persons With Disabilities and Response. (Civ. Code, § 54.8.)

\$0000.00- \$1500.00= \$30

Plaintiff (list names):

\$1500.01-\$5000.00= \$50 \$5000.01- \$10000.00=\$75

If have filed more than 12 cases= \$100

- Serve the Agent for Service or Officer

- Will be Substitute Service

1	Case Number:		
ı	ouco mumber.		
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ı			
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Street address	: 123 Main Street	Los Angelo	es	CA	90012
	Street	City		State	Zip
Mailing addre	ess (if different): Street	City			7:_
If more tha	n one plaintiff, list next pla	•		State	Zip
Name:	One plantin, not next pla		ne.		
Street address		THO			
	Street	City		State	Zip
Mailing addre	ess (if different):				
	Street	City		State	Zip
	re if more than two plaintiffs and a		- L	ζ,	
	re if either plaintiff listed above is a				
	re if any plaintiff is a "licensee" or	"deferred deposit originator"	'(payday	lender)	under Financi
Code sect	ions 23000 et seq.	4:			
The defend	lant (the person, business,	or public entity being s	ued) is	::	
Name: Grann	y's Bakery, LLC	Phor	ne:		
n	; 789 White Oak Ave.	Los Angele	•¢	CA	90018
Street address	, 707 WHILE OUR AVE.	EUS Aligeit	,G		
	Street	City	,3	State	Zip
	Street ess (if different):	City	,3	State	
Mailing addre	Street ess (if different): Street	City		State State	Zip
Mailing addre	Street ess (if different):	City		State State	Zip
Mailing addre	Street ess (if different): Street	City City ted liability company, or		State State	Zip
Mailing addre	Street ess (if different): Street ndant is a corporation, limit uthorized for service of pro	City City ted liability company, or	public	State State entity	Zip , list the pe
Mailing addro If the defer or agent au Name: <u>Nancy</u>	Street ess (if different): Street ndant is a corporation, limit uthorized for service of pro	City City ted liability company, or cess here:	public	State State entity	Zip 7, list the pe
Mailing addre If the defer or agent au Name: <u>Nancy</u>	Street ess (if different): Street ndant is a corporation, limit uthorized for service of pro Bruin Black Oak St.	City City ted liability company, or cess here: Job title, if known	public	State State state sentity for Serv	Zip 7, list the pe
Mailing address or agent at Name: Name: 900 Stree	Street ess (if different): Street Adant is a corporation, limit athorized for service of pro Bruin Black Oak St.	City City ted liability company, or cess here: Job title, if known Los Angeles City	r public : Agent CA State	State State sentity for Serv 90018 Zip	z _{ip} v, list the pe
Mailing address: Name: Name: Name: Name: Pool Stree	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It is a gainst more than	City City ted liability company, or cess here: Job title, if known Los Angeles City one defendant, and attach for	r public : Agent CA State m SC-10	State State State For Serv 90018 Zip 0A.	z _{ip} v, list the pe
Mailing address: 900 Check her	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It It if your case is against more than It is any defendant is on active mili	City City ted liability company, or cess here: Job title, if known Los Angeles City one defendant, and attach for farry duty, and write his or her	r public : Agent CA State m SC-10	State State State For Serv 90018 Zip 0A.	z _{ip} v, list the pe
Mailing address: 900 Check her	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It is a gainst more than	City City ted liability company, or cess here: Job title, if known Los Angeles City one defendant, and attach for farry duty, and write his or her	r public : Agent CA State m SC-10	State State State entity for Serv 90018 Zip OA. re:	z _{ip} v, list the pe ice of Process
Mailing address: 900 Check her Check her	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It It if your case is against more than are if any defendant is on active mili If claims the defendant owe	City City ted liability company, or cess here: Job title, if known Los Angeles City one defendant, and attach for tary duty, and write his or her ces \$ 1,500	Example 2 Page 11 Page 12 Page	State State State entity for Serv 90018 Zip OA. re:	z _{ip} v, list the pe ice of Process
Mailing address: Mame: Name: Name: Name: Name: Stree Check her Check her Check her The plaintia. Why does	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It It if your case is against more than It is any defendant is on active mili	City City ted liability company, or cess here: Job title, if known Los Angeles City one defendant, and attach for itary duty, and write his or her tess \$ 1,500 oney?	Explain	State State State entity for Serv 90018 Zip OA. re:	z _{ip} v, list the pe ice of Process
Mailing address: Mame: Name: Name: Name: Name: Stree Check her Check her Check her The plaintia. Why does	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It If if your case is against more than are if any defendant is on active mili If claims the defendant owe the defendant owe the plaintiff mo	City City ted liability company, or cess here: Job title, if known Los Angeles City one defendant, and attach for itary duty, and write his or her tess \$ 1,500 oney?	Explain	State State State entity for Serv 90018 Zip OA. re:	z _{ip} v, list the pe ice of Process
Mailing address or agent at Name: Name: Name Name Name Name Name Name Name Name	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It If if your case is against more than are if any defendant is on active mili If claims the defendant owe the defendant owe the plaintiff mo iff paid for a wedding cake that wa	City City ted liability company, or cess here: Job title, if known Los Angeles City one defendant, and attach for itary duty, and write his or her tess \$ 1,500 oney?	Explain	State State State entity for Serv 90018 Zip OA. re:	z _{ip} v, list the pe ice of Process
Mailing address or agent at Name: Nancy Address: 900 Stree Check her Check her The plaintia. Why does The plaintig.	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It If if your case is against more than the if any defendant is on active mili If claims the defendant owe the defendant owe the plaintiff mo iff paid for a wedding cake that we this happen? (Date): 01/13/2018	City City Led liability company, or cess here: Job title, if known Los Angeles City Tone defendant, and attach for itary duty, and write his or her less 1,500 Doney? As never delivered to the party.	: Agent CA State m SC-10 name he (Explain	State State State entity for Serv 90018 Zip 0A. re: below):	zip y, list the pe ice of Process 8
Mailing address: Mame: Name: Name: Name: Name: Name: Paint Check here	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It If if any defendant is on active mili If claims the defendant owe the defendant owe the plaintiff mo iff paid for a wedding cake that wa this happen? (Date): 01/13/2018 ific date, give the time period: Da	City City ted liability company, or cess here: Job title, if known Los Angeles City one defendant, and attach for itary duty, and write his or her es\$ 1,500 oney? as never delivered to the party. te started:	Explain Throug	State State State State For Serv 90018 Zip 0A. re: below):	zip r, list the pe ice of Process 8
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Mailing address: Mame: Name: Name: Name: Name: Painting address: 900 Stree Check here Check here Check here The plainting a. Why does The plainting when did b. If no species. How did yet the plainting when did yet the yet	Street ess (if different): Street Indant is a corporation, limit athorized for service of pro Bruin Black Oak St. It If if any defendant is on active mili If claims the defendant owe the defendant owe the plaintiff mo iff paid for a wedding cake that wa this happen? (Date): 01/13/2018 ific date, give the time period: Da	City City ted liability company, or cess here: Job title, if known Los Angeles City one defendant, and attach for itary duty, and write his or her es\$ 1,500 oney? as never delivered to the party. te started:	Explain Throug	State State State For Serve 90018 Zip 0A. re: below):	zip y, list the pe ice of Process 8

\$0000.00- \$1500.00= \$30

\$1500.01-\$5000.00= \$50

Plaintiff (list names): \$5000.01- \$10000.00=\$75

If have filed more than 12 cases= \$100

Case Number:	

- Attach SC-103

Street addre	ss: 123 Main Street		Los Angeles	CA	90012
	Street		City	State	Zip
Mailing add	*********	-			
l f 4la	Stre		City	State	Zip
	- · · · · · · · · · · · · · · · · · · ·	ist next plaintiff h			
Street addre			T none,		
	Street		City	State	Zip
Mailing add	ress (if different):				
	Stree	et	City	State	Ziρ
	-	laintiffs and attach for			
∠ Check h	ere if either plaintiff li	isted above is doing bu.	siness under a fictitious i	name. If so, at	tach form SC-10
☐ Check h	ere if any plaintiff is a	"licensee" or "deferr	ed deposit originator" <mark>(</mark> [oayday lender)	under Financia
Code sec	ctions 23000 et seq.		,62		
The defer	dant (the nercen	husines er nuk	die entity being eu	ad) ia	
	• -	, business, or pur	olic entity being suc	•	
Name: <u>John</u>			Phone:		
Street addres	ss: 456 White Oak A	ve.	Los Angeles	<u>CA</u>	90018
N. 6 '11' 1.1	Street		City	State	Zip
Mailing add	ress (if different):				
	Stree	et Carrier	City	State	Zip
			•		•
			ility company, or p		•
		ration, limited liab rvice of process h	ility company, or p		•
or agent a	uthorized for se	rvice of process h	ility company, or p ere:	ublic entity	, list the per
or agent a Name:		rvice of process h	ility company, or p	ublic entity	, list the per
or agent a Name: Address:	uthorized for se	rvice of process h	ility company, or pere: Job title, if known:	ublic entity	, list the per
or agent a Name:	uthorized for se	rvice of process h	ility company, or p ere:	ublic entity	, list the per
or agent a Name: Address: Stre	et	rvice of process h	ility company, or pere: Job title, if known:	ublic entity	, list the per
or agent a Name: Address: Stre	et et gour case is aga	vice of process h	vility company, or pere: Job title, if known: City endant, and attach form in the company of the c	State Zip	, list the per
or agent a Name: Address: Stre Check he Check he	et ere if your case is aga ere if any defendant is	rvice of process h inst more than one defe	ility company, or pere: Job title, if known: City endant, and attach form in any and write his or her na	State Zip	, list the per
or agent a Name: Address: Stre Check he Check he	et ere if your case is aga ere if any defendant is	vice of process h	ility company, or pere: Job title, if known: City endant, and attach form in any and write his or her na	State Zip	, list the per
or agent a Name: Address: Stre Check he Check he The plaint	et ere if your case is againere if any defendant is	inst more than one defe on active military duty	ility company, or pere: Job title, if known: City endant, and attach form in any and write his or her na	State Zip SC-100A. Time here:	, list the per
Name: Address: Stre Check he Check he The plaint a. Why doe	et et ere if your case is againere if any defendant is tiff claims the defendant owe the	inst more than one defe on active military duty tendant owes \$ 1,000 the plaintiff money?	ility company, or pere: Job title, if known: City endant, and attach form in any, and write his or her na	State Zip SC-100A. me here:xplain below):	, list the per
Name: Address: Stre Check he Check he The plaint a. Why doe	et et ere if your case is againere if any defendant is tiff claims the defendant owe the	inst more than one defe on active military duty tendant owes \$ 1,000 the plaintiff money?	ility company, or pere: Job title, if known: City endant, and attach form in any and write his or her na	State Zip SC-100A. me here:xplain below):	, list the per
Name: Address: Stre Check he Check he The plaint a. Why doe	et et ere if your case is againere if any defendant is tiff claims the defendant owe the	inst more than one defe on active military duty tendant owes \$ 1,000 the plaintiff money?	ility company, or pere: Job title, if known: City endant, and attach form in any, and write his or her na	State Zip SC-100A. me here:xplain below):	, list the per
Name: Address: Stre Check he Check he The plaint a. Why doe The defe	et et ere if your case is againere if any defendant is tiff claims the defendant owe the	inst more than one defe on active military duty fendant owes \$ 1,000 he plaintiff money? plaintiff for catering a	ility company, or pere: Job title, if known: City endant, and attach form in any, and write his or her na	State Zip SC-100A. me here:xplain below):	, list the per
Name:	et ere if your case is againere if any defendant is tiff claims the defendant owe to indant did not pay the d this happen? (Date)	inst more than one defe on active military duty fendant owes \$ 1,000 he plaintiff money? plaintiff for catering a	ility company, or pere: Job title, if known: City endant, and attach form and write his or her na B00 (E.) dinner party at the defen	State Zip SC-100A. me here: xplain below): dant's house.	, list the per
Name: Address: Stre Check he Check he The plaint a. Why doe The defe When di b. If no spe	et ere if your case is againere if any defendant is tiff claims the defendant owe tondant did not pay the difficult date, give the time.	inst more than one deferment on active military duty fendant owes \$ 1,000 he plaintiff for catering a compared to the period: Date started	ility company, or pere: Job title, if known: City endant, and attach form and write his or her na 800 . (E. dinner party at the defendant.	State Zip SC-100A. me here: xplain below): dant's house.	, list the per
Name:Address:Stree Check hear	et ere if your case is againere if any defendant is tiff claims the defendant owe tondant did not pay the difficult date, give the time.	inst more than one deference on active military duty fendant owes \$ 1,5 he plaintiff money? plaintiff for catering a : 03/13/2018 he period: Date started ney owed to you? (Do and active of the proof o	ility company, or pere: Job title, if known: City endant, and attach form and write his or her na B00 (E.) dinner party at the defen	State Zip SC-100A. me here: xplain below): dant's house.	, list the per

\$0000.00- \$1500.00= \$30

Plaintiff (list names): \$1500.01-\$5000.00= \$50

\$5000.01-\$10000.00=\$75

If have filed more than 12 cases= \$100

- Substitute service may be done on an employee

Case Number:	

Name: Jan	e Doe	Phone: 21	3-333-123	4
Street addr	ress: 123 Main Street	Los Angeles	CA	90012
Mailing ad	Street dress (if different):	City	State	Zip
waning ac	Street	City	State	
If more t	han one plaintiff, list next plain	tiff here:		·
Name:				
Street addr				
N 4 1 1 1 1 1 1 1	Street	City	State	Zip
Mailing ad	dress (if different): Street	City	State	Zip
☐ Check	here if more than two plaintiffs and atta	· ·	State	ΣΙΡ
Code s	here if any plaintiff is a "licensee" or "a ections 23000 et seq. endant (the person, business, o m Smith Individually and DBA John's Te	r public entity being sued)	is:	
			CA	90018
Street addr	ress: 456 White Oak Ave. Street	Los Angeles City	CA State	90018 Zip
Street addr Mailing ad	ess: 456 White Oak Ave. Street dress (if different): Street fendant is a corporation, limited	Los Angeles City City I liability company, or pub	State	Zip Zip
Street addr Mailing ad If the det or agent	ress: 456 White Oak Ave. Street dress (if different): Street fendant is a corporation, limited authorized for service of proce	Los Angeles City City I liability company, or pub	State State lic entity	Zip Zip v, list the pers
Street addr Mailing ad If the det or agent Name:	ess: 456 White Oak Ave. Street dress (if different): Street fendant is a corporation, limited authorized for service of proce	Los Angeles City City I liability company, or pub ss here:	State State lic entity	Zip Zip v, list the pers
Street addr Mailing ad If the det or agent Name: Address:	ess: 456 White Oak Ave. Street dress (if different): Street fendant is a corporation, limited authorized for service of proce	Los Angeles City City I liability company, or pub ss here:	State State lic entity	Zip Zip v, list the pers
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\$0000.00- \$1500.00= \$30

\$1500.01-\$5000.00= \$50

Plaintiff (list names): \$5000.01- \$10000.00=\$75

If have filed more than 12 cases= \$100

Serve	Agent	for Se	ervice o	r Office

-Will be substitute service

Case Num	ber:	 ***************************************	 	

Name: Jane Do	oe		Phon	e: <u>213-333-12</u>	.34
Street address:	123 Main Stree	et	Los Angele	s CA	90012
Mailina addrsa	Street		City	State	Zip
Maining addres	s (if different): _ s	Street	City	State	Zip
If more than		f, list next plainti	-	0.000	_,,
	•			e:	
Street address:					
	Street		City	State	Zip
Mailing addres	s (if different): _	Street	City	- Charles	7:-
Check here		o plaintiffs and attaci	•	State	Zip
	•		g business under a fictitiou	s name. If so, o	attach form SC-1
			eferred deposit originator"		-
	ons 23000 et seq.		, ,	9	,
The defenda	ant (the perso	on. business. or	public entity being s	ued) is:	
	` .	,	Phone	•	
Name: Places t			Inon		
	1234 White Oa	ık Ave.	Los Angeles	s CA	90018
Street address:	1234 White Oa		Los Angeles	State	Zip
Street address: Mailing addres	1234 White Oa Street s (if different): 5 S dant is a corp	66789 West 9th Street Street	Los Angeles City Hollywood City liability company, or	State CA State	Zip 90026 Zip
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\$0000.00- \$1500.00= \$30

\$1500.01-\$5000.00= \$50

Plaintiff (list names): \$5000.01- \$10000.00=\$75

If have filed more than 12 cases= \$100

-File a State Claim for	Damages initially
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Case Number:

Name: Jane	Doe	-	Pho	ne: 213-333-12	234
	s: 123 Main Street		Los Angel		90012
	Street		City	State	Zip
Mailing addr	ess (if different):				· · · · · · · · · · · · · · · · · · ·
	Street		City	State	Zip
	an one plaintiff, list	•			
			Pho	ne:	
Street addres	S:		C'4		7:
Mailing addr	ress (if different):		City	State	Zip
	Street		City	State	Zip
☐ Check he	ere if more than two plain	tiffs and attach fori	n SC-100A.	CAT	
☐ Check he	ere if either plaintiff listed	above is doing bus	siness under a fictitio	us name. If so, c	attach form SC-103
Check hε	ere if any plaintiff is a "lic	ensee" or "deferre	ed deposit originator	" (payday lende	r) under Financial
	tions 23000 et seq.			9	
The defen	dant (the person, bu	ieinaee or niih	lic entity being	sued) is:	
	of California	isiness, or pub	Pho	•	
***************************************	s: 300 South Spring Stre	et Room 1700	Los Angel		90012
Succi addies	Street	ct, Room 1700	City	State	
Mailing addr	ess (if different):		Olly	Oldie	Σip
-	Street		City	State	Zip
If the defe	ndant is a corporati	on, limited liab	ility company, o	r public enti	ty, list the pers
	ndant is a corporatiuthorized for servic			r public enti	ty, list the pers
or agent a	uthorized for servic	e of process h	ere:		
or agent a Name: <u>Offic</u>	uthorized for servic e of the Attorney General	e of process h	ere: Job title, if know		neral
or agent a Name: <u>Offic</u>	uthorized for service of the Attorney General South Spring Street, Roo	e of process h	ere:	n: Attorney Ger	neral
or agent a Name: Offic Address: 300 Street	e of the Attorney General South Spring Street, Roo	e of process he	Los Angeles City	n: Attorney Ger CA 900 State Zip	neral
or agent a Name: Offic Address: 300 Street	e of the Attorney General South Spring Street, Rooset re if your case is against	e of process hom 1700 more than one defe	Los Angeles City and attach for	n: Attorney Ger CA 900 State Zip rm SC-100A.	neral
or agent a Name: Offic Address: 300 Street	e of the Attorney General South Spring Street, Roo	e of process hom 1700 more than one defe	Los Angeles City and attach for	n: Attorney Ger CA 900 State Zip rm SC-100A.	neral
or agent a Name: Offic Address: 300 Stree Check he Check he	e of the Attorney General South Spring Street, Rooset re if your case is against	e of process hom 1700 more than one defeactive military duty	Los Angeles City and attach for and write his or her	n: Attorney Ger CA 900 State Zip rm SC-100A. r name here:	neral 012
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or agent a Name: Offic Address: 300 Stree Check he Check he The plaint a. Why doe	e of the Attorney General South Spring Street, Roo of re if your case is against re if any defendant is on a iff claims the defend s the defendant owe the p	e of process he may be a 1700 more than one deferenciive military duty dant owes \$ 5,0 laintiff money?	Los Angeles City and attach for and write his or her	n: Attorney Ger CA 900 State Zip rm SC-100A. r name here: (Explain below	neral
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Plaintiff (list names):

\$0000.00- \$1500.00= \$30

\$1500.01-\$5000.00= \$50

\$5000.01- \$10000.00=\$75

Case Number:		
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The plaintiff (the person, business, or public er Name: Jane Doe	•	: 213-3	33_1 72	4
Street address: 123 Main Street	Los Angeles		33-123 CA	90012
Street address: 123 Main Street	City		State	Zip
Mailing address (if different):	Ony		Ctate	mip.
Street	City		State	Zip
lf more than one plaintiff, list next plaintiff here	:			
Name:		·		
Street address:				
Street	City		State	Zip
Mailing address (if different):				<u></u>
Street Check have if more than two mightiffs and attach forms Si	City		State	Zip
 Check here if more than two plaintiffs and attach form So Check here if either plaintiff listed above is doing busine. 		11 (11)	for at	tach form SC 1
Check here if any plaintiff is a "licensee" or "deferred d	•			•
Code sections 23000 et seq.	eposii originalor	puyaay •	ienaer)	unuer Financ
•	45			
The defendant (the person, business, or public		•		
	Phone	(213)		
Street address: 500 W. Temple St., Room 383, Hall of Adm	in. Los Angeles		CA	90012
				
Street	City		State	Zip
Street Mailing address (if different): Street If the defendant is a corporation, limited liability	City City y company, or p	oublic	State State	Zip Zip
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Street Mailing address (if different): Street If the defendant is a corporation, limited liability or agent authorized for service of process here Name: Clerk of the Board, Executive Office, BOS Address: 500 W. Temple St., Room 383, Hall of Admin. Street Check here if your case is against more than one defendant. Check here if any defendant is on active military duty, and the plaintiff claims the defendant owes \$ 5,000 a. Why does the defendant owe the plaintiff money? My car was damaged during a high speed chase by the Lew When did this happen? (Date): 9/13/2018 b. If no specific date, give the time period: Date started: c. How did you calculate the money owed to you? (Do not its)	City City y company, or p : Job title, if known: Los Angeles City ant, and attach form ad write his or her no . (Heat of the company	Clerk o CA State SC-100 ame her Explain Depart	State State State entity f the Bo 90012 Zip A. ee: below): ment.	Zip Zip 7, list the pe Dard 2
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- File a City Claim of Damages initially

Filing Fee:

\$0000.00- \$1500.00= \$30

\$1500.01-\$5000.00= \$50

Plaintiff (list names):

\$5000.01- \$10000.00=\$75

	Case Number:	
	Case Hairibei.	
1		
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Name: Jane I	Ooe	P	Phone: 213-3	33-123	4
Street address	s: 123 Main Street	Los An	geles	CA	90012
3.4.11. 11	Street	City		State	Zip
Mailing addr	ess (if different): Street	City		State	Zip
If more the	ın one plaintiff, list next pl	•		State	ΖΙ
Name:	m one plantin, not next pla		hone:		
Street address		<u> </u>	mone.		
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	200 N. Main St., Room 395	Los Ang		473 - 3. CA	90012
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\$0000.00- \$1500.00= \$30

Plaintiff (list names): \$1500.01-\$5000.00= \$50

\$5000.01-\$3000.00=\$30

Case Number:	
0000 / 10//1001 /	

	Doe (Registered Owner) or (R/C s: 123 Main Street		Phone: 2		
Street addres	Street		Los Angeles City	CA State	90012
Mailing addr	ess (if different):		Спу	State	Zip
	Street		City	State	Zip
If more that	an one plaintiff, list next _l	olaintiff here:			
	Doe (Driver) or (D)		Phone:		
Street addres	s: 123 Main Street		Los Angeles	<u>CA</u>	90012
Mailing addr	Street ess (if different):		City	State	Zip
maning addi	Street		City	State	
☐ Check he	re if more than two plaintiffs an	d attach form SC-100A	1.	CA	 -
☐ Check he	re if either plaintiff listed above	is doing business unde	er a fictitious nar	ne. If so, at	tach form SC-10.
	re if any plaintiff is a "licensee'	' or "deferred deposit	originator" (pay	day lender)	under Financia
Code sec.	tions 23000 et seq.		1.55		
The defen	dant (the person, busine:	ss, or public entity	y being sued) is:	
Name: Mike	Jones (R/O) and (D)		Phone: 81	8-222-567	8
Ctunet eddune	s: 1234 Whale Lane		Los Angeles	CA	90018
Street addres	J. 125 1 Whate Daily				
	Street		City	State	Zip
	Street ess (if different):	W O	City		·
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This form is attached to for	rm SC-100, item 1 or 2.		
	•	or entity su	ing), list their information below
Other plaintiff's name:			
Street address:			Phone:
City:	State:	Zip:	
Mailing address (if different):			
Is this plaintiff doing business			
Other plaintiff's name:	•		
Street address:			Phone:
City:	State:	Zip:	
Mailing address (if different):		 • 	
Other defendant's name: Mary Street address: 1234 Whale La City: Los Angeles	ane	Zip: 900	Phone:
Mailing address (if different):	State: CA	·	
City:	State:	Zip:	
City: If this defendant is a corporati	State:	Zip:	ity, list the person or agent authorized for
City: If this defendant is a corporati service of process:	State: ion, limited liability company	Zip: v, or public ent	ity, list the person or agent authorized for
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Judicial Council of California, www.courts.ca.gov Revised January 1, 2017, Mandatory Form Code of Civil Procedure, § 116.110 et seq.

Type or print your name

Type or print your name

Date: 12/13/2018

John Doe

Sign your name

Sign your name

\$0000.00- \$1500.00= \$30

\$1500.01-\$5000.00= \$50

Plaintiff (list names): \$5000.01- \$10000.00=\$75

If have filed more than 12 cases= \$100

Case Number:	
Ouse Hallistel.	

Street address:	123 Main Street		Los Angeles	CA	90012
	Street		City	State	Zip
Mailing addres	ss (if different): Street		City	State	7/2
If more that	ા one plaintiff, list ne	vt plaintiff boro:	City	State	Zip
n more mai Name:	Tone plantin, list he	•	Phone:		
Street address:			1 110110.		
	Street		City	State	Zip
Mailing addres	ss (if different):				<u></u>
	Street		City	State	Zip
	e if more than two plaintiffs	•		AY.	
	e if either plaintiff listed ab	-	The second secon	. 🖜	•
	e if any plaintiff is a "licen.	see" or "deferred depo	osit originator'' (pay	day lender)	under Financia
Code secti	ons 23000 et seq.		.65		
The defend	ant (the person, busi	ness, or public er	ntity being sued) is:	
Name: <u>Nathan</u>	Jones, a minor, by Mike J	ones, his father	Phone: 81	8-222-5678	8
		~	I on America	CA 90	
Street address:	1234 Whale Lane		Los Angeles		
Street address:	1234 Whale Lane Street		City	State	Zip
		NP O	City	······································	
	Street	GANRAD	——————————————————————————————————————	······································	
Mailing addres	Street SS (if different): Street	, limited liability o	City	State State	Zip Zip
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Revised January 1, 2020

\$0000.00- \$1500.00= \$30

Plaintiff (list names): \$1500.01-\$5000.00= \$50

\$5000.01- \$10000.00=\$75

If have filed more than 12 cases= \$100

- You can personally serve one partner on behalf of the partnership.

Case Number:	

Nar	me: <u>Jane Do</u>	e		ublic entity that is suing) is: Phone: 213-333-1234			
		123 Main Street		Los Angeles	CA	90012	
		Street		City	State	Zip	
Mai	iling address	(if different):		C#.		7:	
ie "	mara than	Street	novt plaintiff boso	City	State	Zip	
		•	next plaintiff here				
	eet address:			i none.			
		Street		City	State	Zip	
Mai	iling address	(if different):					
	CI 1.1	Street	ntiffs and attach form S	City	State	Zip	
	Code section	ns 23000 et seq.	icensee" or "deferred a	رجي		under Financi	
Nar	me: Pam Joo	and Jim Joo Individu	ually and DBA PJ's Tea	Phone: 2	13-444-888	8	
						00016	
		1234 Whale Lane	*****	Los Angeles	<u>CA</u>	90016	
Stre		1234 Whale Lane Street (if different):	ul ^P	Los Angeles City	CA State	90016 Zip	
Stre Mai	iling address	Street (if different): Street	SAIRL	City	State	Zip Zip	
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Stree Mai	iling address he defend agent aut	Street (if different): Street ant is a corporat	ce of process here	City City y company, or pu	State State blic entity	Zip Zip	
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\$0000.00- \$1500.00= \$30

\$1500.01-\$5000.00= \$50

Plaintiff (list names): \$5000.01- \$10000.00=\$75

If have filed more than 12 cases= \$100

-The Trust and the named trustees have to be served.

Case Number:

Name: <u>Jane</u>			e: <u>213-333-123</u>	
Street addres	ss: 123 Main Street	Los Angeles		90012
Mailing addi	Street ress (if different):	City	State	Zip
mannig addi	Street	City	State	
If more th	an one plaintiff, list next pla	·		•
Name:			·	
Street addres				
N.A. 202	Street	City	State	Zip
iviailing addr	cess (if different): Street	City	State	Zip
Check he	ડાઇઇલ ere if more than two plaintiffs and a	•	State	ΔIÞ
	ere if either plaintiff listed above is a	•	name. If so att	ach form SC-19
	ere if any plaintiff is a "licensee" or			-
	ctions 23000 et seq.	y = 1 · · · · · · · · · · · · · · · · · ·	5	
The defen	dant (the person, business,	or public entity being ou	ied) ie:	
	na Gomez, Trustee of the Susana Go	-	•	2
	ss: 303 Main Street	Los Angeles		90016
Succi audies		Los Aligeies	<u>CA</u>	70010
	Street	City	State	7in
Mailing addr	Street ress (if different): Street	City	State State	Zip
_	ress (if different): Street	City	State	Zíp
If the defe	ress (if different): Street Indant is a corporation, limit	city ted liability company, or p	State	Zíp
If the defe or agent a	ress (if different): Street Indant is a corporation, limit outhorized for service of pro	city ed liability company, or p cess here:	State public entity	Zíp
If the defe or agent a Name:	ress (if different): Street Indant is a corporation, limit	city ted liability company, or p	State public entity	Zíp
If the defe or agent a Name:	ress (if different): Street Indant is a corporation, limit outhorized for service of pro	city ed liability company, or p cess here:	State public entity	Zíp
If the defe or agent a Name: Address: Stree	ress (if different): Street Indant is a corporation, limit nuthorized for service of pro	City ted liability company, or pess here: Job title, if known: City	State public entity State Zip	Zíp
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SC-100A

Other Plaintiffs or Defendants

Case Number:	
Case Rullinel.	
b	

	☑ This form is attached to form SC-100, ite	em 1 or 2.		
(1)	If more than two plaintiffs (person		=	——————————————————————————————————————
	Other plaintiff's name:			
	Street address:			
	City:			
	Mailing address (if different):			
	City:			
	Is this plaintiff doing business under a fictiti			
	Other plaintiff's name:			
	Street address:			Phone:
	City:			
	Mailing address (if different):			
	City:	State:	Zip:	
	Is this plaintiff doing business under a fictiti	ous name? 🔲 Ye	s 🔲 No If 🤈	ves, attach form SC-103.
_	☐ Check here if more than 4 plaintiffs and	fill out and attach	another form	1 SC-100A.
(2)	If more than one defendant (perso	n, business, o	r entity be	ing sued), list their information
_	below:	U.	(5)"	
	Other defendant's name: Thomas Gomez, T		na Gomez Li	ving Trust
	Street address: 303 Main Street	- NY	<u> </u>	
	City: Los Angeles	State: CA	Zip: 90010	5
	Mailing address (if different):	3, K		
	City:	State:	Zip:	
	If this defendant is a corporation, limited lia	bility company, or	public entity	, list the person or agent authorized for
	service of process: Name:	Job tit	le. if known:	
	Address:		,	
	City:	State:	Zip:	
	Check here if your case is against more			
(3)	Is your claim for more than \$2,500	•	•	-
	If yes, I have not filed, and understand that I			ill claims cases for more than \$2,500 in
_	California during this calendar year.			·
(4)	I understand that by filing a claim	in small claims	s court, I h	ave no right to appeal this
_	claim.			
	lare under penalty of perjury under California	a state law that the	information	above and on any attachments to this
	is true and correct.			•
	: 05/13/2018 Dog			Vare Doe
Jane Type	or print your name		<u> </u>	Sign your name
Date				
Туре	or print your name		<u> </u>	Sign your name

\$0000.00- \$1500.00= \$30

Plaintiff (list names): \$1500.01-\$5000.00= \$50

\$5000.01- \$10000.00=\$75

Case Number:	

-	ntiff (the person, business, o	•		
Name: Jan	ess: 123 Main Street	Los Angeles	213-333-123 CA	90012
Succi addi	Street	City	State	Zip
Mailing ad	dress (if different):			
	Street	City	State	Zip
If more to Name:	han one plaintiff, list next pla			
Street addre	ess:			
Mailing ad	Street dress (if different):	City	State	Zíp
	Street here if more than two plaintiffs and a	City	State	Zip
Code se	here if either plaintiff listed above is a here if any plaintiff is a "licensee" or ections 23000 et seq.	· "deferred deposit originator" (pa	yday lender)	
	ndant (the person, business,		l) is:	
	City Roseville Community Associat		~ .	0.55.45
Street addre	ess: 8020 Lipton Blvd. Street	Roseville	CA	95747
Mailing add	dress (if different):	City	State	Zip
_	authorized for service of prove Roseville	cess here: Job title, if known: Pre	acidant	
	020 Lipton Blvd. #30		A 9574	7
	reet		tate Zip	1
	بالم	•	,	
	nere if your case is against more than	•		
Check l	here if any defenda <mark>nt is</mark> on active mili	tary duty, and write his or her nam	e here:	
The plair	ntiff claims the defendant owe	es \$ <u>1,000</u> . (Exp	lain below).	:
The hor	oes the defendant owe the plaintiff mo meowners association failed to provided in association bylaws Section 15.01	le plaintiff access to association bo		
provide	a in association bylaws section 13.01	i, Davis Sterring Flot, and CH Corp	. Code Sect	ion 6555.
When d	lid this happen? (Date):			
b. If no sp	secific date, give the time period: Da	te started: <u>9/13/2018</u> Th	rough: to da	te
Davis-S	d you calculate the money owed to you sterling Act as amended by AB104 proms were requested and not provided.	rovides for penalties of up to \$500.0		
	nere if you need more space. Attach o		and write "I	SC-100, Item 3" a