

Fax: (619) 245-2400



Los Angeles: 213.291.0758
Orange: 714.453.9839
Riverside: 951.742.8921
San Bernardino: 909.522.4415
San Diego: 619.270.1145

RUSH

REGULAR

Small Claims Division

Plaintiffs' Name & Location: (USE A STAMP)

Phone No.: ()

Fax No.: ()

DATE FAXED: _____

SPECIFY COURT: _____

File New Small Claim - Verified Home & Employment.

Skip Trace Defendant - Postal Search Only.

Locate Defendant - Database Search, SS# Search, etc...

DEFENDANTS' INFORMATION

Applicants Name:

Applicants Description: M / F HAIR: BLK / BRN / BLND / RED EYES: BRN / GRN / BLU
HEIGHT: WEIGHT: AGE: RACE:

Co-Applicants Name:

Co-Applicants Description: M / F HAIR: BLK / BRN / BLND / RED EYES: BRN / GRN / BLU
HEIGHT: WEIGHT: AGE: RACE:

Home Address:

City, State, Zip: _____
Phone No's: () ()

Employers Name:

Supervisors Name: _____ Title: _____
Work Address: _____
City, State, Zip: _____
Phone No.: () Ext: () Ext: _____

SPECIAL INFORMATION: Independent Contractor / Business Owner / Social Security Number / Other:

INITIAL SMALL CLAIMS

AMOUNT OWED: \$ _____

DATE OF DEFAULT: _____

- DEFAULTED ON: SALES CONTRACT
 DOWN PAYMENT
 LOAN CONTRACT
 NSF CHECK / STOP PAYMENT

Other: _____

**POST JUDGMENT - 30 DAYS AFTER
FAX OVER THE NOTICE OF ENTRY OF JUDGMENT**

CASE NO.: _____

AMOUNT OF JUDGMENT: \$ _____

DATE OF JUDGMENT: _____

- FILE JDX: ORDERS DEFENDANT TO PRODUCE INFO.
 FILE WRIT: WAGE GARNISHMENT / BANK LEVY.
 FILE ABSTRACT: LIEN AGAINST NAME / PROPERTY.
 FILE SATISFACTION OR FILE RELEASE OF LIEN.