

IN THE CIRCUIT COURT OF JACKSON COUNTY, MISSOURI

SMALL CLAIMS COURT

AT KANSAS CITY

AT INDEPENDENCE

PLAINTIFF(S)

NO. _____

STREET ADDRESS

DATE, TIME AND DIVISION OF HEARING

CITY STATE ZIP

Jackson County Service Requested

Private Process Server

RES. PHONE WORK PHONE

Certified Mail Service Requested
Delivery Restricted to Addressee

VS.

Out of County Service _____

DEFENDANT(S)

SERVICE ADDRESS

CITY STATE ZIP

PETITION

Plaintiff states that he has a claim against the defendant, which arose on or about _____, in the amount of \$ _____. Defendant is a resident of _____ County, in the State of _____.

The claim arose in _____ County, the State of _____, due to the following events:

Plaintiff states that the information contained in this petition is true and correct to the best of his knowledge, that he is not an assignee of this claim and that he has not filed more than twelve (12) claims in any Missouri small claims court during the current calendar year.

Plaintiff understands that should he/she be successful in this action and obtain a judgment, and if defendant does not appeal within 10 days, this judgment becomes final. Plaintiff cannot commence another action involving the same parties and issues. Plaintiff also understands that any amount over the small claims monetary jurisdiction owed by defendant arising out of this transaction is deemed waived. **PLAINTIFF IS HEREBY WAIVING HIS RIGHT TO JURY TRIAL ON THESE ISSUES IN THE SMALL CLAIMS COURT.**

(Information available at www.16thcircuit.org)

**KEEP A COPY OF THIS PETITION
AND BRING TO COURT**

SIGNATURE OF PLAINTIFF