

LAW OFFICE OF
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FAX COVER SHEET

ATTENTION: COLLECTION DEPARTMENT

REQUEST FOR SMALL CLAIMS FILING

DATE: _____

FROM: _____

PHONE # _____ **FAX#** _____

(sender's name, address, telephone number)

RE: _____ **V.** _____
PLAINTIFF **DEFENDANT(DEBTOR)**

Enclosed please find the following:

- _____ **Small Claims Take Sheet**
- _____ **Credit Card Authorization**
- _____ **Copy of Bounced Check**
- _____ **Disposition of Security Deposit**
- _____ **Other (copy of receipts, estimates)**

(senders name and signature)