SAMPLE FORM AND INFORMATION

Small Claims Court is for money damages only, up to \$6,000.

Individuals, corporations, or partnerships living or doing business in Franklin County, Ohio can sue and be sued in Small Claims Court.

Individuals

Must be 18 years or older. It is important to accurately list the name and address of each plaintiff and defendant in the lawsuit. Do not use nicknames. If there are multiple individuals in the lawsuit please list each name and address separately.

Partnerships

A general partner or an attorney may represent a partnership in Small Claims Court. The names and addresses for most Ohio partnerships are registered with the Franklin County Recorder's Office.

Corporations

A corporation may sue or be sued in its own name. Only an attorney may present legal arguments or file motions and collections paperwork on behalf of a corporation. Corporations, their statutory agents, and addresses, are registered with the Ohio Secretary of State.

What Happens Next?

Watch your Mail! The hearing date will be scheduled once the complaint is filed.

FRANKLIN COUNTY MUNICIPAL COURT SMALL CLAIMS DIVISION

			Case No	CVI
Your First and Last Name			The Othe	r Party's Name
Your Street Address			Other Party	r's Street Address
City, State, and Zip Code			City, State	e, and Zip Code
Your Phone Number			Other Party	's Phone Number
Plaintiff(s) Name, Address, ZIP Code, and Telephone Numbers			Defendant(s) Name, Telephone Numbers	Address, ZIP Code, and
(3) The Summons (D failed service and	currently in the le efendant's Notice the certified ma	United States Mi ce of the Compla Ill is returned as late. Do you wa	litary Service? [] Y aint) will be sent by cer "Refused" or "Unclaim	es [] No tified mall. If you waive notice o ed," the Court will resend by illed service? [] Yes [] No
Answer "Ye:	s" or		·	
,	"No" to these			
three questi	QUESTIONS.		n why the Defendant(s)	
		•	owe you mone	
		How, w	hen, and whe	re did the
			claim arise?	
		This sho	uld be a brief s	tatement!
			Please use	an additional page if necessary
Plaintiff demande jude	omost againet F	efondant in the		ount, plus court costs and
Interest.	ပြုက်မေး ဆို့များသည်			plac coult books and
		COMPLAIN	ANT'S OATH	
Write First and La (check one) [] Pla corporation. Complai "I declare under pet	intiff [] Plai mant also states	ntiff's attomey the following:	[] an officer or sala	last name), is ried employee of the Plaintiff to the best of my knowledge."
	Signatu	re.		Date:
•	oigiiaid √	Plaintiff, Plair	tiff's attorney, or Plaint	iff's officer or salaried employee.
-			Attorney Registration	on#:
г	<u> </u>		-	
•	Each Plaintiff Must Sign and			
date the Complaint!			ist Sign and	
			-	

CONFUSED ABOUT QUESTION #3?

If you select YES to Question #3



You give the court the permission to resend the summons and complaint by ordinary mail if the certified mail is returned as "Refused" or "Unclaimed"



The court will resend the summons and complaint automatically with **no** additional work required by you if the certified mail is returned "Refused" or "Unclaimed"



There will be **no added court costs** if you choose to select yes



Also, **YOU MUST** check 'Waiver of Notification of failure' line on 'New Civil Case Filing' cover sheet if you select Yes

If you select NO to Question #3



You will be notified about failed service and you will be responsible for requesting the court to resend the summons and complaint



You must do additional work because you must give the court further instructions on how you want to proceed



You may have to **pay additional court fees** if you choose to select no



DO NOT check 'Waiver of Notification of failure' line on 'New Civil Case Filing' cover sheet if you select No

FRANKLIN COUNTY MUNICIPAL COURT SMALL CLAIMS DIVISION

		Case No CV I
Plaintiff(s) Telephone	Name, Address, ZIP Code, and Numbers	Defendant(s) Name, Address, ZIP Code, and Telephone Numbers
(2) Is the D (3) The Sur failed se	nmons (Defendant's Notice of the Co ervice and the certified mail is returned mail and set a new trial date. Do yo	res [] No res Military Service? [] Yes [] No res Military Service? [] Yes [] No representation of the count will seem of the count will resend by results of the count will resent by results of the count will result by results of the count wi
•		
	,	
A		Please use an additional page if necessar
Plaintiff dem interest.	nands judgment against Defendant ir	the sum of \$, plus court costs and
	COMP	LAINANT'S OATH
/chack ana)	[] Digintiff [] Digintiff's offern	(print first and last name), is ney [] an officer or salaried employee of the Plaintiff
	Complainant also states the following	
"I declare ı	under penalty of law that this Com	plaint is true and correct to the best of my knowledge.
ı acad an İnterno	ter? Select language.	
u neeu an interpre pañol (Spanish)	Signature:	Date:
(Arabic) العر	☐ Soomaali (Somali) ☐ खस भाषा (Nepali)	Plaintiπ's attorney, or Plaintiff's officer or salaried employee
通话 (Mandarin) ский (Russian)	☐ አማርኛ (Amharic)	Attorney Registration #:
Language	☐ Tigrigna (Tigrinya) ☐ Other	

NEW CIVIL CASE FILING COVERSHEET

LORI M TYACK, CLERK OF COURTS FRANKLIN COUNTY MUNICIPAL COURT

THIS COVER SHEET MUST BE COMPLETED FOR ALL NEW CASE FILINGS

(Please check all that apply) **CASE TYPE:** "E" Personal Injury/Property Damage \$121.00 "F" Contracts/Notes/Accounts \$121.00 "F" Cognovit \$121.00 "H" 12 Point / Non-Compliance Petitions/Out-of-State \$121.00 "H" **BMV Reinstatement Plan** \$ 20.00 "H" **Certificate of Judgment** \$ 84.00 "H" **Declaratory Judgment** \$121.00 "[" **Small Claims** \$ 86.00 "P" Parking Violations Bureau Petition \$121.00 "CV " Change of Venue \$ 97.00 "EV" Civil Environmental \$121.00 **SERVICE TYPE: (per each Defendant)** Certified Mail \$10.00 Bailiff Service \$25.00 (Franklin County Residents ONLY. Instructions must be filled out.) FedEx \$15.00 Personal/Residence Process Service \$25.00 (must include approval entry) Waiver of Notification of Failure (Form CV-81 MUST be completed) **EVICTIONS CASE TYPE:** "G" F.E.D. 1 Cause of Action (EVICTION ONLY) F.E.D. 2 Causes of Action (EVICTION WITH MONEY) \$170.00 NOTE: The above filing fees include Ordinary Mail service PLUS one of the choices below for up to 3 Defendants and/or addresses. Requests for additional Defendants and/or addresses will be charged additional service fees based on the current court fee schedule. ORDINARY MAIL SERVICE WITH ADDITIONAL **Bailiff Service (Instructions must be filled out.) Certified Mail** (Must be signed for to perfect service) Process Server (Must include Approval Entry) Signature of Filing Party: _____ Phone # : ____

PLEASE PRESENT COMPLETED FORM WITH ORIGINAL & SERVICE COPIES TO CASHIER. MAKE CHECKS OR MONEY ORDERS PAYABLE TO <u>FRANKLIN COUNTY MUNICIPAL COURT</u>, or <u>FCMC</u>. ANY RETURNED CHECKS WILL BE CHARGED A \$25.00, RETURNED CHECK FEE.

*Provision of phone number may assist the court if problems are encountered

Rev: Dec/2025

Defendant Phone # (if available): ___