

**IN THE MAGISTRATE COURT OF DOOLY COUNTY
STATE OF GEORGIA**

PLAINTIFF:

DEFENDANT:

Case no.	_____
Date filed	_____
Total claimed	\$ _____
Court use only	

STATEMENT OF CLAIM

Suit on : a NOTE [] ACCOUNT [] Other [] explain : _____

Plaintiff says that defendant(s) is/are indebted to the plaintiff as follows:

Claim Principal Amount is \$ _____, Interest \$ _____, Attorney's Fees \$ _____, and \$87.00 Court costs to date, and all future costs.

STATE OF GEORGIA, COUNTY OF DOOLY

_____, being duly sworn, says that the foregoing is a just and true statement of the plaintiff and claim made by plaintiff against defendant(s), exclusive of all set-offs and just grounds of defense.

Sworn and subscribed before me
this ____ day of _____, 20__.

Agent or Attorney for Plaintiff

Notary Public or Attesting Official

NOTICE AND SUMMONS

TO : _____

You are hereby notified that _____ has made and filed a claim and is asking for judgment against you in the total sum of \$ _____, which includes principal, interest, attorney fees, and court costs as shown by the foregoing statement.

To: YOU ARE REQUIRED TO FILE OR PRESENT AN ANSWER TO THIS CLAIM WITHIN 30 DAYS AFTER SERVICE OR CLAIM AGAINST YOU. IF YOU DO NOT FILE AN ANSWER, JUDGMENT BY DEFAULT WILL BE ENTERED AGAINST YOU. YOUR ANSWER MAY BE FILED IN WRITING OR MAY BE GIVEN ORALLY TO A CLERK OF THIS COURT DURING REGULAR BUSINESS HOURS.

**THE MAGISTRATE COURT OF DOOLY COUNTY IS LOCATED AT: 113 N. Third St, Room 2 , VIENNA, GA.
TELEPHONE NUMBER 229-268-4324.**

The court will hold a hearing upon this claim at a time after your answer is filed. If you have witnesses, books, receipts, or other writings bearing on this claim, you should bring them with you at the time of the hearing. If you wish to have witnesses summoned, see the court at once for assistance.

If you have a claim against the plaintiff, you should notify the court at once. If you admit the claim, but desire additional time to pay, you must come to the hearing in person and state the circumstances to the court. You may come with or without an attorney.

Magistrate/ Clerk / Deputy Clerk

Above NOTICE and STATEMENT OF CLAIM served on Defendant(s) _____ named above at _____ m. _____ day of _____, 20___. _____ at (in) _____, in _____, Dooly County, Georgia.

(Deputy) Sheriff or Constable, Dooly County, Ga.