STATE OF WISCONSIN *ESTADO DE WISCONSIN*	CIRCUIT COURT *CORTE DE CIRCUITO*	SMALL CLAIMS *REGLAMOS PEQUENOS*	MILWAUKEE COUNTY *CONDADOS DE MILWAUKEE*	**For official use**

PLAINTIFF (NAME AND ADDRESS) **Print**
Demandante Nombre y Direccion **Letra de molde**

_____

_____

_____

-VS-

DEFENDANT (NAME AND ADDRESS)
Demandado Nombre y Direccion
See attached for multiple defendants

_____

_____

_____

☐ Claim Under Dollar Limit 31001
Reclamo menos del limite

Case NO. _____
Numero de Caso

☐ Replevin 31003

If you need help in this matter because of a disability, please call: (414) 985-5757

☐ Re: Arbitration Award 31006
Juicio de Arbitracion

☐ Return of Earnest Money 31008
El regresode Dinero Serio

SUMMONS *CITA*

You are being sued as described below.
Usted ha sido demandado.

If you wish to dispute this matter, you must appear at the date and time stated.
If you do not appear, a judgment may be granted to the plaintiff in the amount demanded.
You are encouraged to bring with you all papers and documents relating to this matter, but there is no need to bring witnesses at this time.
Defendants who are not residents of Milwaukee County may join issue without appearing on the return date by serving a copy of their written answer to the complaint upon the plaintiff or the plaintiff's attorney, if any, and filing the original answer with the Clerk of Circuit Court, Room 400, 901 North 9th Street, Milwaukee, Wisconsin, 53233.

Si desea usted este asunto, aparezca en la fecha y hora notadoen esta hoja.
Si usted no se presenta, un juicio podria ser otorgado al demandante en lo cantidad demandado.
Se le aconseja que traiga lodos todos las papeles y documentos relacionados con este asunto, pero no es necesario traer testigos esta vez.
Acusados quienes no son residentes del Condado de Milwaukee pueden responder sin hacer la aparencia personal en la primera vista si se sirven al abogado del demandante o al demandante (si el no tiene abogado), y tambien con la corte, una respuesta escrita antes de la fecha de la primera vista en:
Sala 400, 901 Norte Calle 9, Milwaukee, Wisconsin, 53233.

Where to Appear
Visa en la Corte

Date: *Fecha*	Time: *Hora* 9:00 a. m.

Place to Appear
Direccion

Milwaukee County Courthouse
901 North Ninth Street, Room 400
Milwaukee, WI 53233

COMPLAINT *DEMANDA*

JOHN BARRETT
Clerk of Circuit Court/Director of Court Services
Clerico de Cortes Circuito/Director De Servicios de la Corte

Plaintiff's demand: Demandante del demanda:
The Plaintiff states the following claims against the defendant:
Demandante a lega el siguente reclamo contra el demandado:

1. Plaintiff demands judgment for: (Check as appropriate.)
Demandante damanda juicio por (Marca como apropiado.)

☐ **Money** $_____ ☐ **Return of property (Describe in 2. below.) (Not to include §425.205 stats. actions.)**
Dinero Regreso de propiedad (Describa en 2. abago.

☐ **Confirmation, vacation, modification or correction of arbitration award.**
Confirmacion, correccion, o cambio de un juicio de arbitracion.

☐ **Return of Earnest Money.**
El regreso de Dinero Serio.

Plus interest, costs, attorney fees, if any, and such other relief as the court deems proper.
La cantidad mas intereses, costos de corte, costos de abogado, u otro, remedio que la corte juzge propio.

2. Brief Statement of dates and facts – Breve declaracion sobre los nechos y fechas:

☐ Mark box if additional information is attached. Provide copy of statement for court defendant(s)

Plaintiff's Attorney or Plaintiff (signature) *Firma del Abogado Firma del Demandante*	Date *Fecha*	Law Firm and Address *Direccion*
Telephone Number *Telefono*	Attorney's State Bar Number	

Subscribed and sworn to before me

on_____

_____
Notary Public, State of Wisconsin

My Commission Expires_____

Verification: Under oath, I state that the above complaint is true, except as to the matters Stated upon information and belief, and as to those matters, I believe them to be true.
I am: ☐ Plaintiff ☐ Attorney for the plaintiff.

_____
Signature of Plaintiff/Attorney