FORM SCC 2

IN THE MAGISTRATES' COURT OF ANAMBRA STATE (SMALL CLAIMS) COMPLAINT FORM (TO ACCOMPANY FORM SCC 3)

NB: 1. Please fill out the form legibly

- 2. Attach copies of the documents (contracts, receipts, expert's report if applicable etc.
- 3. Submit this form to the Registry of the Small Claims.

A. PARTICULARS OF PLAINTIFF(S)

FULL NAME
WORK ADDRESS
RESIDENTIAL ADDRESS
TELEPHONE NO.(S) & E-MAIL ADDRESS
Attach a list of other Plaintiff(s) (if more than one) with the required particulars.
B. PARTICULARS OF DEFENDANT(S)
FULL NAME
WORK ADDRESS
RESIDENTIAL ADDRESS
TELEPHONE NO.(S) & E-MAIL ADDRESS
C. PARTICULARS OF CLAIMS
TOTAL SUM CLAIMED:
INTEREST:
COSTS:
OTHERS:
Attach a list of other Defendant(s) (if more than one) with the required particulars.
SUMMARISE YOUR COMPLAINT AND STATE THE STEPS YOU HAVE TAKEN TO RECOVER
THE CLAIM:

PLAINTIFF'S SIGNATURE/ THUMBPRINT	DATE		
SWORN to at the Small Claims Court Registry this day of 20			
THE foregoing having been read and interpreted Language, he being illiterate/blind and he having before appending his thumbprint/impression.	-		

JURAT (if applicable)

BEFORE ME

COMMISSIONER FOR OATHS