

To be inserted by Court

Case Number:

Date Filed:

FDN:

STATEMENT OF CLAIM

MAGISTRATES COURT OF SOUTH AUSTRALIA
 CIVIL JURISDICTION
 MINOR CIVIL

Please specify the Full Name including capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number if more than one party of the same type.

First Applicant

First Respondent

Lodging Party	Full Name (including Also Known as, capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable))	
Name of law firm / solicitor If any	Law Firm	Solicitor

**Part 1
 Introduction by Applicant**

Summary of claim - Summarise the claim in one or two sentences

**Part 2
 Background/uncontroversial matters**

Facts expected to be agreed in separate numbered paragraphs

1.

Part 3

Other facts forming the basis of the claim

Other material facts that support the claim in addition to those in Part 2 in separate numbered paragraphs. Be very particular about each matter – e.g. when did it occur, where did it occur, what occurred.

1.

Part 4

Orders sought

Outline orders sought in separate numbered paragraphs

1.

Certification

Mark appropriate section below with an 'x'

-] As the filing lawyer, I certify that this pleading is filed in accordance with the instructions of the party/parties for whom I act. There is a proper basis for each allegation of fact in the pleading and it complies with the Rules of Court.

-] As a Litigant in Person (self-represented), I am responsible for filing this pleading. Each allegation of fact in the pleading is true to the best of my knowledge, information and belief.

.....
Signature

.....
Name printed

.....
Date