

STATE OF SOUTH DAKOTA  
COUNTY OF \_\_\_\_\_

IN MAGISTRATE COURT  
\_\_\_\_\_ JUDICIAL CIRCUIT

**PLAINTIFF'S STATEMENT  
OF SMALL CLAIMS**

\_\_\_\_\_  
\_\_\_\_\_

**Plaintiff Names or Business Name**

**vs.**

**SMC Case #:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Defendant Names or Business Name**

Describe the basis for your claim: (use additional sheet if necessary)

Principal \_\_\_\_\_ (exclude interest and filing fees)

Interest \_\_\_\_\_

Subtotal \_\_\_\_\_

Filing Fees \_\_\_\_\_

**Plaintiff's Total** \_\_\_\_\_

[Small Claims Fee Calculator -  
http://ujs.sd.gov/Self\\_Help\\_Center/smallclaimscalculator](http://ujs.sd.gov/Self_Help_Center/smallclaimscalculator)

Sheriff Service only – no certified mail

Sheriff/Personal Service requested if certified mail returned undelivered

\*Additional fees charged for service options listed above. It's the plaintiff's responsibility to contact the Sheriff's Office or process server for fee amounts and to file the Return of Service.

        
/S/  
Plaintiff's Signature

\_\_\_\_\_  
Date