

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)

[Empty box for describing the basis of the claim]

Principal	_____	(exclude interest and filing fees)
Interest	_____	
Subtotal	_____	
Filing Fees	_____	<a href="https://ujs.sd.gov/Small_Claims/FeeCalculator.aspx">Small Claims Fee Calculator - https://ujs.sd.gov/Small_Claims/FeeCalculator.aspx</a>
<b>Plaintiff's Total</b>	_____	

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