STATE OF SOUTH DAKOTA IN MAGISTRATE COURT

COUNTY OF _____ JUDICIAL CIRCUIT

_____ _____ Plaintiff Names or Business Name v. _____ _____ Defendant Name or Business name	**PLAINTIFF'S STATEMENT OF SMALL CLAIMS** **SMC Case No.:**_____

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

Small Claims Fee Calculator can be found on the South Dakota Unified Judicial website.

Principal _____ (exclude interest and filing fees)

Interest _____

Subtotal _____

Filing Fees _____

Plaintiff's Total $ 0.00

☐ Sheriff Service only – no certified mail

☐ Sheriff/Personal Service requested if certified mail is returned undelivered.

Additional fees charges 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 Signature

Date

Form UJS-008
Rev. 07/2026

CASE FILING STATEMENT – Information Only; Not Retained in Case Records

Provide the Case File No. for the record you are filing into or the Case Type if initiating a new action: _____

*A list of case types and party roles can be found on South Dakota Unified Judicial Attorney forms and Documents webpage.

Social Security Numbers (not Driver's License Numbers) must be provided for divorce, child support, & paternity cases, 42 USC 666(a)(13)(B). All filers are **required** to provide the SSN **or** DL# for each of **their** participants regardless of the case type. Business entities must provide the EIN number in lieu of SSN or DL#.

INFORMATION FOR PLAINTIFF/PETITIONER/APPLICANT:

Last/Business Name | First Name | Middle | Suffix

Physical Address | City | State | Zip
☐ Check is Same as Mailing

Mailing Address | City | State | Zip

Home | Work | Cell

Social Security No. | Date of Birth | Driver's License No. | State | Employed ID (Business)

Attorney:

Last Name | First Name | State Bar ID No.

Mailing Address | City | State | Zip

Phone

INFORMATION FOR DEFENDANT/RESPONDENT/MINOR/DECEDENT/PERSON IN NEED OF PROTECTION

Last/Business Name | First Name | Middle | Suffix

Physical Address | City | State | Zip
☐ Check is Same as Mailing

Mailing Address | City | State | Zip

Home | Work | Cell

Social Security No. | Date of Birth | Driver's License No. | State | Employed ID (Business)

Attorney:

Last Name | First Name | State Bar ID No.

Mailing Address | City | State | Zip

Phone

INSTRUCTIONS AND FORM ON STATEMENT OF DEFENDANT'S MILITARY STATUS

This form references specific South Dakota Codified Laws (SDCL) and you can find these laws on the South Dakota Legislature website. If you have any legal questions, it is highly recommended that you consult with an attorney. Court staff are unable to provide you with legal advice or assist you in completing this form. For specific questions related to the forms, you can also contact the Legal Form Helpline at 1-855-784-0004 or email UJS staff at ujssrlhelp@ujs.state.sd.us.

Important Notice:

Before a default judgment may be entered by the Court the Plaintiff is required to file a statement stating whether the Defendant is in the military service and show necessary facts to support the statement.

To Complete this form, you will need to:

1. Complete the caption by:
    a) Enter Magistrate or Circuit Court
    b) Name of the county you are filing in.
    c) The judicial circuit number of the county.
    d) Plaintiff and Defendant name.
    e) Your case number.

2. Verify that Paragraphs 1through 3 are correct.

3. In completing paragraph 4, the military status of a Defendant may be determined by conducting an on-line search through the Department of Defense Manpower Data Center (DMDC) search engine. A Plaintiff using the DMDC must attach a printed copy of the certificate generated by the search.
    a) The military status of a Defendant may be determined by contacting each branch of the military. A plaintiff using this method must attach a response from each branch.

    b) The military status of a Defendant may also be determined by the Plaintiff, or their agent, personally asking the Defendant or another individual that has sufficient reason to know the defendant's military status.

    c) The Plaintiff is not limited to the options discussed above and may have other reasons to know the Defendant's military status. Any additional reasons should be explained for review by the court.

4. Date and sign.

5. File original with the Clerk of Court and retain a copy for your records.

STATE OF SOUTH DAKOTA IN_____COURT

COUNTY OF_____ _____ JUDICIAL CIRCUIT

_____ Plaintiff v. _____ Defendant	Case No.:_____ **STATEMENT OF DEFENDANT'S MILITARY STATUS**

I, the undersigned litigant, state the following:

1. I am over the age of eighteen years and am competent to make this statement.
2. I am the Plaintiff in the above-entitled matter.
3. That I have either made a personal investigation or personally reviewed the business record of the defendant.
4. As a result of my investigation or review: *(check one)*
   - ☐ It is my belief that the above-named defendant is not in the military on active duty;
   - ☐ It is my belief that the above-name defendant is in the military on active duty;
   - ☐ I have been unable to determine whether the defendant is in the military on active duty.

My information and belief are based on the following, and I have attached the necessary documentation: _____

_____

I declare under penalty of perjury under the law of South Dakota that the foregoing is true and correct.

Signed on the_____day of_____, _____at _____.
(Day) *(Month)* *(Year)* *(City, or other location, and State)*

_____
Plaintiff Signature

_____
Plaintiff Name

_____
Address

_____
City/State/Zip

_____
Phone Number

Form UJS-306
Rev. 04/2026

STATE OF SOUTH DAKOTA IN MAGISTRATE COURT

COUNTY OF _____ _____ JUDICIAL CIRCUIT

_____ _____ Creditor v. _____ _____ Debtor	SMC Case No.: _____ **SMALL CLAIMS NOTICE OF DISMISSAL**

Based upon the fact that:

- ☐ The Defendant has paid in full.
- ☐ A compromise has been reached.
- ☐ No service was attained after 90 days.

In the above-entitled matter, it is hereby agreed that this action be dismissed,

- ☐ With prejudice (Bars further prosecution)
- ☐ Without prejudice (Permits further prosecution)

Dated this _____ day of _____ , _____.
(Date) (Month) (Year)

_____
Plaintiff or Clerk of Court

Note: Please file this document with the Court if the Debtor should pay your claim before the hearing date.

Form UJS-255
Rev. 06/2026

STATE OF SOUTH DAKOTA IN MAGISTRATE COURT

COUNTY OF _____ _____ JUDICIAL CIRCUIT

_____ _____ Creditor v. _____ _____ Debtor	SMC Case No.: _____ **SATISFACTION OF JUDGMENT**

I, _____, the above-named judgment creditor, acknowledge Satisfaction of Judgment entered against _____, the above-named judgment debtor in Small Claims Court, in and for the County of _____, in the amount of $_____.

I declare under penalty of perjury under the law of South Dakota that the foregoing is true and correct. Signed on the _____ *day of* _____, _____ *at* _____.
(Date) (Month) (Year) (City or other location, and State)

_____
Signature

_____
Printed Name

_____
Address

_____
City, State, Zip Code

_____
Phone Number