Supreme Court of Prince Edward Island Small Claims Section

Defendant's Claim Form 10A

[SEALED]

Plaintiff No. 1

Plaintiff No. 2 (if applicable)

Full name	Full Name	
Address for Service	Address for Service	
Phone No. Fax No.(if any)	Phone No. Fax No. (If any)	
Plaintiff's Lawyer/Agent (Full Name)	Plaintiff's Lawyer/Agent (Full Name)	
Lawyer/Agent's Address for Service	Lawyer/Agent's Address for Service	
Lawyer/Agent's Phone No. Fax No. (If any) E-Mail Address (Optional)	Lawyer/Agent's Phone No. Fax No. (If any) E-Mail Address (Optional)	

Defendant No. 1

Defendant No. 2 (if applicable)

Full name	Full Name	
Address for Service	Address for Service	
Phone No. Fax No. (If any)	Phone No. Fax No. (If any)	
Defendant's Lawyer/Agent (Full Name)	Defendant's Lawyer/Agent (Full Name)	
Lawyer/Agent's Address for Service	Lawyer/Agent's Address for Service	
Lawyer/Agent's Phone No. Fax No. (If any) E-Mail Address (Optional)	Lawyer/Agent's Phone No. Fax No. (If any) E-Mail Address (Optional)	

Note: For additional defendants, please list on attached sheet with all the necessary information as requested above.

Claim no.

TO THE DEFENDANT(S) IN THE DEFENDANT'S CLAIM:

The plaintiff in the Defendant's Claim in this action claims from you

\$ amount of claim plus \$interest claimed to date (if any), and costs for the reason(s) set out below.

The plaintiff further claims from you pre-judgment interest and post-judgment interest in accordance to the *Supreme Court Act*.

IF YOU DO NOT FILE A DEFENCE WITH THE COURT WITHIN TWENTY (20) CALENDAR DAYS AFTER YOU HAVE RECEIVED THIS DEFENDANT'S CLAIM, JUDGMENT MAY BE ENTERED AGAINST YOU.

TYPE OF CLAIM

[] Unpaid Account	[] Promissory Note	[] Damage to Property
[] Contract	[] Services Rendered	[] Lease
[] Motor Vehicle Accident	[] N.S.F. Cheque	[] Other

REASONS FOR CLAIM AND DETAILS

Explain what happened, where and when and the amounts of money involved.

If more space is required, attach separate sheet(s).

If the claim is based in whole or in part on a document(s), **you must attach** a copy of the document(s) to the defendant's claim, or if the document(s) is lost or unavailable, **you must explain** why it is not attached in the space provided below.

(Date)

(Signature of Defendant)

(Date)

(Signature of Clerk)