

**Supreme Court of Prince Edward Island
Small Claims Section**

**Notice of Default Judgment
Form 11A**

Claim no.

[SEALED]

Plaintiff No. 1	Plaintiff No. 2 (if applicable)
Full name	Full Name
Address for Service	Address for Service
Phone No.	Phone No.
Fax No. (If any)	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.	Lawyer/Agent's Phone No.
Fax No. (If any)	Fax No. (If any)
E-Mail Address (Optional)	E-Mail Address (Optional)

Defendant No. 1	Defendant No. 2 (if applicable)
Full name	Full Name
Address for Service	Address for Service
Phone No.	Phone No.
Fax No. (If any)	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.	Lawyer/Agent's Phone No.
Fax No. (If any)	Fax No. (If any)
E-Mail Address (Optional)	E-Mail Address (Optional)

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

NOTE: Take notice that default judgment has been entered in this action as against for the following sums:

Debt (claimed amount) \$ *amount*

Pre-judgment interest is calculated -

on the sum of \$ _____ at the rate of _____ %

per annum from *date* _____ to *date* _____ .

being *number of days* _____ days. \$ *amount*

Costs \$ *amount*

Total \$ *amount*

This judgment bears post-judgment interest at _____ % per annum commencing this date.

(Date)

(Signature of clerk)

<p>NOTE: If you are asking for judgment against different defendants for different amounts, separate Notices of Default Judgment for each defendant will confirm accuracy.</p>
