

General Civil Claim Statement

COURT INFORMATION

Court File Number: _____

Court Name: _____

Registry: _____

PARTIES

Plaintiff(s): _____

Address: _____

Defendant(s): _____

Address: _____

CLAIM DETAILS

Date of Relevant Event(s): _____

Summary of Claim:

Relief Sought:

Material Facts:

DECLARATION & SIGNATURE

Dated: _____

Location: _____

Signature: _____

Name (Print): _____