

Personal Injury Statement of Claim

1. Plaintiff Information

Full Name

Address

Phone

Email

2. Defendant Information

Full Name

Address

Phone

Email

3. Incident Details

Date of Incident

Location

Description of the Incident

4. Injuries Sustained

Describe the injuries sustained

5. Damages and Losses

Medical Expenses

Lost Wages

Other Damages

6. Relief Sought

Specify relief sought by Plaintiff

7. Declaration

I, the undersigned, state that the information provided above is true and correct to the best of my knowledge.

Signature

Date
