

Van Buren Town Court
7575 VanBuren Road
Baldwinsville NY 13027

Hon. Darlene O'Kane
Town Justice

Phone: 315-635-3523

Hon. Jay Plumley
Town Justice

vanburentowncourt@nycourts.gov

PLAINTIFF (Person/Persons filing claim)

NAME: _____

ADDRESS: _____

TELEPHONE: _____

DEFENDANT (Person, Company, Corp. being sued) Must live or work in T/Van Buren

NAME: _____

ADDRESS: _____

TELEPHONE: _____

AMOUNT OF CLAIM: \$ _____

(Note: Claim must be for money only and may not exceed \$3,000.00)

STATE NATURE OF CLAIM: (The defendant owes me money because...)

EVIDENCE: At the hearing you will be expected to prove your claim, and you should bring with you, any evidence of debt claimed, e.g.; receipts, contract, estimated bills, cancelled checks, etc.

AFFIRMATION:

I affirm that the above is correct to the best of my knowledge and that _____

(Defendant's Name)

Owes me \$ _____

Dated: _____ Plaintiff: _____