

VILLAGE OF TIVOLI COURT

86 Broadway
P.O. Box 397
Tivoli, NY 12583

Phone: (845) 757-3219

Justice Danielle Cordier
Fax: (845) 757-3319

SMALL CLAIMS PART

_____Plaintiff

_____Address

_____Telephone #

VS

_____Defendant

_____Address

_____Telephone#

AMOUNT OF CLAIM \$ _____

Nature and particulars of Plaintiffs Claim:

Dated: _____

Plaintiff/Person making claim for plaintiff

IF SPACE IS INSUFFICIENT, USE REVERSE SIDE

FEES: \$ 1.00 - \$1,000.00	COST \$10.00
\$ 1000.01- \$3,000.00	COST \$15.00
Counter Claim	COST \$ 3.00 + postage
Transcript of Judgement	COST \$ 5.00

I have received a Small
Claims Guide (booklet)

Plaintiff/Person making claim for plaintiff

An electronic copy of the Small Claims guide may be obtained at the following website: www.nycourthelp.gov

