

Approved, SCAO

STATE OF MICHIGAN
JUDICIAL DISTRICT
66th

AFFIDAVIT AND CLAIM
Small Claims

CASE NO.
04-329SC

Court address

110 East Mack Street, County Building, Corunna, Michigan 48817

Court telephone no.

989-743-2395

See instructions on the back of plaintiff and defendant copies

1. Joel Munn DBA Munn Audio Video
Plaintiff

434 Main St.
Address

Mount Morris, MI 48458 810-625-3257
City, state, zip Telephone no.

2. Kevin + Denise Hedrick DBA Satellite Pros
Defendant

175 S. Main St.
Address

Ovid, MI 48866 989-834-9690
City, state, zip Telephone no.

hm 613 Huron St. Owosso 48867

3. I have knowledge or belief about all the facts stated in this affidavit and I am:
(check one) the plaintiff. a partner. a full-time employee of the plaintiff.

4. The plaintiff is: (check one) an individual a partnership a corporation a sole proprietor

5. The defendant is: (check one) an individual a partnership a corporation a sole proprietor

6. Date(s) claim arose: 9/8/03 - 10/15/03

7. Amount of money claimed: \$ 850.00 + costs
(NOTE: Plaintiff's costs are determined by the court and awarded as appropriate. They are not part of the amount claimed.)

8. A civil action between these parties or other parties arising out of the transaction or occurrence alleged in this complaint has been previously filed in _____ Court. The case number, if known, is: _____
The action remains is no longer pending.

9. Reasons for claim: (attach additional sheets if needed)

I performed satellite system installations for Satellite Pros for which I have not been paid.

10. The plaintiff understands and accepts that the claim is limited to \$3,000.00 by law and that the plaintiff gives up the rights to:
(a) recover more than this limit, (b) an attorney, (c) a jury trial, and (d) appeal the judge's decision.

11. I believe that the defendant is not in the military service, is not mentally incompetent, and is 18 years or older.

12. [Signature]
Signature

Subscribed and sworn to before me on 8-19-04, SHIOWASSEE County, Michigan.

My commission expires: _____ Date Signature: [Signature]
Deputy clerk/Notary public

Notary public, State of Michigan, County of Shiawassee

13. Expiration date: 11-19-2004

NOTICE OF HEARING	
For Court Use Only	
14. Plaintiff and defendant must be in court on	
Thursday,	October 21, 2004
Day	Date
at 10:00 A.M.	at <input checked="" type="checkbox"/> the court address above
Time	
<input checked="" type="checkbox"/> Corunna, Michigan 48817	
Location	
GORDON MOONLORPH	Fee paid: \$ _____
Process server's name	

TRUE COPY
66th District Court
[Signature]