

PLAINTIFF

V.

NAME OF DEFENDANT

NO.

STATE OF _____

COUNTY OF

PERSONALLY CAME AND APPEARED BEFORE the undersigned authority in and for said
county and state, _____ who, being by me first duly sworn, stated upon his oath the
following:

1. I am _____ of _____, _____(state). I am more than 21 years of age and suffer from no legal or mental disability.

2. I am the owner of _____, a sole proprietorship with its principal place of business in _____(city), _____ County, _____(state). I have personal knowledge of the facts set forth in this Affidavit.

3. Defendant in the above styled and numbered cause, _____, agreed and contracted to pay for materials and services rendered to Defendant on credit. Said _____ is justly indebted to _____ in the principal sum of \$____, which represents reasonable compensation for the services rendered, as evidenced by the statement of account and the invoices attached hereto and incorporated herein by reference.

4. The attached statement of account is true, just, accurate and correct as stated, no part of same has been paid, the same is currently due and owing from said _____, said account is not usurious, nor is it subject to any setoff, and said _____ has not paid and has failed and refused to pay said account.

5. Plaintiff has made written demand upon Defendant _____ to pay the amount owed as specified and itemized in the statement of account and the invoices attached hereto, but Defendant has failed or refused to pay the same within thirty (30) days.

SWORN TO AND SUBSCRIBED BEFORE ME on this the _____ day of _____,
_____.

NOTARY PUBLIC

My Commission Expires:
