

STATE OF INDIANA)
) SS:
COUNTY OF ALLEN)

IN THE ALLEN SUPERIOR
SMALL CLAIMS COURT
FORT WAYNE, INDIANA

CASE NUMBER:

Plaintiff(s)

VS.

Defendant

Street Address

City, State Zip Code

VERIFIED MOTION FOR PROCEEDINGS SUPPLEMENTAL TO DEFENDANT

Plaintiff / Plaintiff's counsel appears and states that to the best of its/his/her knowledge:

1. Plaintiff owns the judgment rendered in this case against the Defendant(s);
2. Plaintiff's judgment is unsatisfied, with a balance due upon judgment, interest and costs in the amount of \$_____; and
3. Plaintiff has no cause to believe that levy of execution against the Defendant(s) will satisfy the judgment.

Plaintiff requests that the Court issue an order notifying Defendant(s) of hearing on these proceedings and requiring the Defendant(s) to appear to testify concerning its/his/her property.

I affirm, under the penalty of perjury, that the foregoing representations are true.

Street Address of Plaintiff / Attorney

Signature of Plaintiff / Attorney

City, State Zip Code

Printed Name of Plaintiff / Attorney

Telephone Number Supreme Court ID Number

Certificate of Service

I hereby certify that a copy of this document was sent to the parties or their counsel by _____
(US Mail, E-Service, Sheriff, other manner allowed by IN Trial Rules).

Date

Name

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**ORDER GRANTING MOTION FOR PROCEEDINGS SUPPLEMENTAL
TO DEFENDANT**

Plaintiff files verified motion for proceedings supplemental. Motion granted. Any prior proceedings supplemental pending against Defendant(s) _____

in this cause is ordered dismissed.

TO THE DEFENDANT:

You are ordered to appear in this Court on _____ at _____ A.M./P.M. in the Allen Superior Court Small Claims Division, 1 West Superior St., Fort Wayne, IN 46802 and bring with you evidence of your income and assets.

YOU ARE HEREBY NOTIFIED THAT FAILURE TO APPEAR IN COURT MAY RESULT IN YOUR BEING HELD IN CONTEMPT OF COURT AND BEING PUNISHED BY INCARCERATION IN THE COUNTY JAIL FOR A PERIOR NOT TO EXCEED NINETY (90) DAYS.

Date

Magistrate, Allen Superior Court

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Date

Name