IN THE JUSTICE OF THE PEACE COURT OF THE STATE OF DELAWARE IN AND FOR _____ COUNTY COURT NO. ____

COURT ADDRESS:			CIVIL AC	ΓΙΟΝ ΝΟ
PLAINTIFF((1)Name				DEFENDANT(S):
Address				
Phone				
Attorney, if any				any
(2)Name				
Address				
Phone				
Attorney, if any			Attorney, if any	
Judgment	\$			
Judgment	\$			
Pre-judgment interest	\$			
Court Costs	\$			
Attorney's Fees	\$			
Post-judgment interest	at% pe	er year		
Post-judgment rent at S	\$ X	days.		
TOTAL	\$			
DATED:				
Signature of Plaintiff		_	Sign	nature of Plaintiff No. 2, if any
(Plaintiff's Attorney,	if anv)		(A	ttornev's Address/Phone No.)