DISTRICT COURT O	AIMS DIVISION OF THE DF THE THIRD CIRCUIT DIVISION DF HAWAI'I				
Plaintiff(s)					
		Reserved for Court Use			
		Civil No.			
Defendant(s)		Filing Party/Attorney Name, Attorney Number, Firm Name (if applicable) Address, Telephone and Fax Number.			
STATEMENT OF CLAIM					
Plaintiff alleges as follows:					
I am a resident and/or do busine	ess at				
Since (date), 20, Defendant owes me the sum of \$ for					
Defendant resides and/or does	business at				
in the State of Hawai'i.					
Plaintiff asks for a judgment in In addition, Plaintiff asks for ar	the principal amount of \$n award of interest, costs and fees as of	leemed reasonable and allowed by the Court.			
DECLARATION I DECLARE UNDER PENALTY OF PERJURY THAT WHAT I HAVE STATED ABOVE IS TRUE AND CORRECT.					
I DECLARE UNDER	Signature of Declarant:	THAT I HAVE STATED ADOVE IS TRUE AND CORRECT.			
Date:	Print/Type Name:				
		I certify that this is a full, true and correct copy of the original on file in this office.			
		Clerk, District Court of the Above Circuit, State of Hawai'i			

		NOTICE				
	ТО			:		
	This Statement of Claim will be hear	d by a Judge at the address checked below o	n			
			at	m.		
	YOU MUST BE PRESENT ON THI	S TRIAL DATE TO AVOID JUDGMENT B	Y DEFAULT.			
		COURT ADDRESS				
☐ Puna Division 777 Kilauea Avenue, 2nd Floo		777 Kilauea Avenue, 2nd Floor, Hilo, Hawai'i 96720-4212				
		777 Kilauea Avenue, 2nd Floor, Hilo, Hawai'i 96720-4212				
		74-5451 Kamakaeha Avenue, Kailua	-Kona, Hawaiʻi 96	740		
	<b>Ka'ū Division</b> – To be heard at Nor		Zailua Vana Haw	oii 06740		
☐ South Kohala Division		Kona: 74-5451 Kamakaeha Avenue, Kailua-Kona, Hawai'i 96740 67-5187 Kamamalu Street, Kamuela, Hawai'i 96743				
	Hāmākua Division – To be heard at South Kohala Division					
	67-5187 Kamamalu Street, Kamuela, Hawai'i 96743					
	North Kohala Division – To be he					
		67-5187 Kamamalu Street, Kamuela, Hav	vai'i 96743			
<b>1</b> 74-	_	for the court: ☐ 777 Kilauea Avenue, Hilo ua-Kona, Hawaiʻi 96740 ☐ 67-5187 Ka				
	If you have witnesses, or docum	ents related to this claim, you should br	ing them with you t	to trial.		
	If you wish to subpoena witness	es for trial, contact the clerk as soon as	possible before trial	l.		
	You may come with or without a	an attorney.				
	A Small Claims case cannot be t transfer and the Regular Claims	ransferred to the Regular Claims Divisi filing fee is paid to the Court.	on unless the Plaint	iff agrees to the		
	If a counterclaim is for more that and the case will be transferred to	n \$5,000.00, either party may demand a to the Circuit Court	jury trial, pay the j	ury demand fee,		
	You have NO RIGHT TO APPEAL from a judgment of the Small Claims Division.					
Ι		D DEFEND ON THE DATE AND TINBE ENTERED AGAINST YOU FOR AIM.		· · · · · · · · · · · · · · · · · · ·		
(	Clerk					
		delivered between 10:00 p.m. and 6:00 writing on this notice, personal deliver	-	-		

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far in advance as possible to allow time to provide an accommodation.

will try to provide, but cannot guarantee, the requested auxiliary aid, service, or accommodation.

If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as

Call the ADA Coordinator at (808) 961-7629, Fax (808) 961-7577, or send an e-mail to adarequest@courts.hawaii.gov. The ADA Coordinator