**BASIC COURT IN {{ sd\_court\_name }} (Court name)**

**PLAINTIFF:** {{ sd\_claimant\_full\_name }}, residing at {{ sd\_claimant\_street }} No. {{ sd\_claimant\_adress\_number }}, {{ sd\_claimant\_city }}, Serbia, with Identification Number {{ sd\_claimant\_id\_number }} (Claimant info), represented by Attorney {{ sd\_lawyer\_full\_name }}, residing at {{ sd\_lawyer\_adress }}, Serbia.

**DEFENDANT:** 1. {{ sd\_defendant\_full\_name }}, residing at {{ sd\_defendant\_street }} No. {{ sd\_defendant\_adress\_number }}, {{ sd\_defendant\_city }}, Serbia, with Identification Number {{ sd\_defendant\_id\_number }} (Defendant info)

**COMPLAINT**

**For Personal Injuries**

**Amount in Dispute:** {{ sd\_dispute\_value }} Serbian Dinars (RSD)

**Introduction**

**Incident:**

1. On {{ sd\_date\_of\_accident }} (year), at approximately {{ sd\_time\_of\_accident }} AM, the Plaintiff, {{ sd\_claimant\_full\_name }}, was lawfully walking as a pedestrian on [describe specific location, e.g., the {{ sd\_side\_of\_street }} sidewalk of] {{ sd\_street\_name }} in {{ sd\_city\_of\_accident }} towards the [direction, e.g., city center]. Weather conditions at the time were [describe weather conditions, e.g., clear and dry]. Traffic flow was [describe traffic flow, e.g., moderate].
2. The intersection of {{ sd\_street\_name }} with {{ sd\_intersecting\_street }} Street is a busy intersection controlled by a traffic signal system. The pedestrian crosswalk at this intersection is clearly marked with painted markings and pedestrian crossing signs.

**Accident:**

1. As the Plaintiff approached the intersection, the traffic signal indicated a [color] light for pedestrian crossing in the direction the Plaintiff intended to travel. The Plaintiff checked for oncoming traffic in both directions and, observing no danger, proceeded to cross the street within the marked crosswalk.
2. While the Plaintiff was lawfully crossing the street in a marked crosswalk with due care and attention, the Defendant, {{ sd\_defendant\_full\_name }}, operating a [make and model of vehicle] with registration number {{ sd\_vehicle\_registration\_number }}, disregarded the traffic signal and [describe Defendant's specific actions that caused the accident, e.g., entered the intersection at high speed without yielding the right of way to pedestrians in the crosswalk].
3. As a direct and proximate result of the Defendant's negligence in failing to yield the right of way and disregarding the traffic signal, the Defendant's vehicle struck the Plaintiff with significant force in the middle of the crosswalk.

**Injuries:**

1. As a direct and proximate result of the Defendant's negligence, the Plaintiff sustained significant physical injuries, including [list specific injuries suffered by the Plaintiff, e.g., a fractured left tibia and fibula, a laceration on the forehead requiring stitches, soft tissue injuries in the neck and back]. Medical documentation detailing the nature and extent of these injuries is attached hereto as Exhibit {{ sd\_evidence\_no1 }} and incorporated herein by reference.
2. A qualified medical specialist, Dr. [Doctor's name], has examined the Plaintiff and determined that the injuries are causally connected to the accident. Dr. [Doctor's name]'s expert opinion is attached hereto as Exhibit {{ sd\_evidence\_no2 }} and incorporated herein by reference.
3. The Plaintiff's injuries have required [describe specific medical treatments the Plaintiff has undergone, e.g., surgery to repair the fractured bones, physical therapy to regain mobility]. The Plaintiff will likely require additional medical treatment in the future, including [describe anticipated future medical needs, e.g., physical therapy to manage chronic pain].

**Damages**

1. **Medical Expenses:** The Plaintiff has incurred and will continue to incur significant medical expenses for the treatment of his injuries. These expenses include, but are not limited to, [list specific medical expenses incurred, e.g., hospital bills, doctor visits, physical therapy, medication]. The Plaintiff seeks compensation for all past and future medical expenses related to the accident.
2. **Lost Wages:** Due to his injuries, the Plaintiff has been unable to work since the accident and has lost wages in the amount of [amount] RSD. The Plaintiff is employed as a [Plaintiff's job title] and earns a salary of [amount] RSD per year. The Plaintiff's