

## STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

For Official Use

Plaintiff: (Name [first, middle, last], Address, City, State, Zip)

Demandante: (Nombre [primero, segundo, apellido], domicilio, ciudad, estado, código postal)

☐ See attached for additional plaintiffs

Ver adjunto para otros demandantes

☐ Amended Enmendado**Summons and Complaint  
Small Claims  
Citaciones y Demandas  
Reclamos de menor cuantía****-vs- contra-**

To: Defendant(s) : (Name [first, middle, last], Address, City, State, Zip)

Para: Demandado(s): (Nombre [primero, segundo, apellido], domicilio, ciudad, estado, código postal)

☐ See attached for additional defendants

Ver adjunto para otros demandados

Case No. \_\_\_\_\_

Número de caso

☐ Claim for money (\$10,000 or less) 31001

Reclamo de dinero (\$10.000 o menos)

☐ Return of property (replevin) 31003

Devolución de propiedad (Reivindicación de cosas muebles)

☐ Eviction Desalojo 31004☐ Eviction due to foreclosure 31002

Desalojo por ejecución de hipoteca

☐ Arbitration award 31006

Sentencia de arbitraje

☐ Return of earnest money 31008

Devolución de seña

☐ Tort/Personal injury (\$5,000 or less) 31010

Agravio/Daños Corporales (\$5.000 o menos)

If you require reasonable accommodations due to a disability to participate in the court process, please call \_\_\_\_\_ at least 10 working days prior to the scheduled court date. Please note that the court does not provide transportation.

Si necesita ajustes razonables debido a una discapacidad para poder participar en el procedimiento judicial, sírvase llamar como mínimo 10 días hábiles antes de la fecha judicial programada. Por favor tome en cuenta que el tribunal no proporciona transporte.

This form does not replace the need for an interpreter, any colloquies mandated by law, or the responsibility of court and counsel to ensure that persons with limited English proficiency fully comprehend their rights and obligations.

Este documento no sustituye el uso de un intérprete, ni los coloquios judiciales exigidos por la ley. Tampoco sustituye la responsabilidad del tribunal y los abogados de asegurarse de que las personas cuya comprensión del idioma inglés sea limitada entiendan por completo sus derechos y obligaciones.

**SUMMONS CITACIÓN****To the Defendant(s): Para el/los demandado/s:**

You are being sued as described below. If you wish to dispute this matter:

Lo están demandando según lo indicado abajo. Si desea disputar este asunto:

☐ You must appear at the time and place stated.

Debe comparecer a la hora y en el lugar establecidos.

**AND/OR** (Clerk will circle one)**Y/O** (El Actuario del juzgado marcará una)☐ You must file a written answer and provide a copy to the plaintiff or plaintiff's attorney on or before the date and time stated.

Debe presentar una respuesta por escrito y proporcionar una copia al demandante o al abogado del demandante en la fecha y hora establecidas o con anterioridad a ellas.

If you do not appear or answer, the plaintiff may win this case and a judgment entered for what the plaintiff is asking.

Si no comparece ni responde, el demandante puede ganar esta causa y se puede dictar un fallo a favor de lo que el demandante esté solicitando.

Clerk/Attorney Signature Firma del Actuario de Juzgado/Abogado

John Bauett

**When to Appear/File an Answer  
Fecha para comparecer/  
presentar una respuesta**Date  
FechaTime  
Hora**Place to Appear/File an Answer  
Lugar para comparecer/presentar una  
respuesta**Date Summons Issued  
Fecha de emisión de la citaciónDate Summons Mailed  
Fecha en la que se envió la citación

**COMPLAINT DEMANDA****Plaintiff's Demand: Demanda del demandante:**

The plaintiff states the following claim against the defendant(s):

*El demandante realiza la siguiente demanda contra el/los demandado/s:*

1. Plaintiff demands judgment for: (Check as appropriate) *El demandante exige un fallo por: (Marcar lo que corresponda)*

☐ Claim for Money \$ \_\_\_\_\_

*Reclamo de dinero*

☐ Tort/Personal injury \$ \_\_\_\_\_

*Agravio/Daños Corporales*

☐ Return of Earnest Money

☐ Eviction

☐ Eviction due to foreclosure

*Devolución de seña*

*Desalojo*

*Desalojo por ejecución de hipoteca*

☐ Return of property (replevin) (Describe property in 2 below.) *Devolución de propiedad (Reivindicación de cosas muebles) (Describe los bienes en el punto 2 abajo)*

(Not to include Wis. Stats. 425.205 actions to recover collateral.)

*(Excluyendo las acciones en virtud de las leyes de Wisconsin 425.205 para la recuperación de bienes dados en garantía.)*

- ☐ Confirmation, vacation, modification or correction of arbitration award.

*Confirmación, anulación, modificación o corrección de sentencia arbitral.*

Plus interest, costs, attorney fees, if any, and such other relief as the court deems proper.

*Más intereses, costos, honorarios legales, de existir, y toda otra asistencia que el tribunal considere adecuada.*

2. Brief statement of dates and facts: (If this is an eviction action and you are seeking money damages, you must also state that claim on this form.)

*Breve declaración de fechas y hechos: (Si es una acción de desalojo y busca el resarcimiento de dinero, debe también indicar ese reclamo en este formulario)*

\_\_\_\_\_  
\_\_\_\_\_

- ☐ **See attached for additional information.** Provide copy of attachments for court and defendant(s).  
*Ver adjunto para información adicional. Proporcione copia de adjunto para el tribunal y el/los demandado/s.*

**Verification:** Under oath, I state that the above complaint is true, except as those matters stated upon information and belief, and as to those matters, I believe them to be true.

**Verificación:** Declaro bajo juramento que la demanda precedente es verdadera, excepto con respecto a aquellos asuntos basados en información y creencias, y en cuanto a esos asuntos, creo que son verdaderos.

I am: ☐ plaintiff. ☐ attorney for the plaintiff.

Soy: *demandante.* *abogado del demandante.*

State of \_\_\_\_\_

*Estado de*

County of \_\_\_\_\_

*Condado de*

Subscribed and sworn to before me on \_\_\_\_\_

*Suscrito y jurado ante mí*

\_\_\_\_\_  
Notary Public/Court Official


*Notario Público, Funcionario del tribunal*

\_\_\_\_\_  
Name Printed or Typed

*Nombre escrito en letra de molde o a máquina.*

My commission/term expires: \_\_\_\_\_

*Mi comisión/mandato vence:*

Signature of Plaintiff or Attorney <i>Firma del demandante o abogado</i>  	Date <i>Fecha</i>	Attorney's State Bar Number <i>Número de inscripción del abogado en el Colegio de Abogados</i>
Plaintiff's/Attorney's Telephone Number <i>Teléfono del demandante/abogado</i>	Law Firm and Address <i>Bufete de abogados y domicilio</i>	

-VS-

Plaintiff (Name and Address)

Defendant (Name and Address)

The plaintiff alleges

1. That he/she is the owner of the premises located at: \_\_\_\_\_  
which the defendant(s) rented.

**FIRST CAUSE OF ACTION**

2. That defendant(s) is/are:  
Delinquent in payment of rent in the amount of \$ \_\_\_\_\_  
Failed to comply with the terms of the lease.  
Other \_\_\_\_\_
3. That on \_\_\_\_\_ plaintiff served the defendant(s) with a \_\_\_\_\_ day notice to vacate the premises.  
Said notice was served personally/by posting and mailing (strike one).
4. The defendant(s) is/are in possession of the premises without permission of the plaintiff.

**SECOND CAUSE OF ACTION**

1. Plaintiff realleges the allegations of the first cause of action as if fully set forth here.
2. That there is still due and owing to the plaintiff, from the defendant(s) delinquent rent in the sum \$ \_\_\_\_\_
3. That there is further due from the defendant(s), damages in the sum of \$ \_\_\_\_\_
4. That there is now due and owing to the plaintiff from the defendant(s) the total sum of \$ \_\_\_\_\_

Wherefore, the plaintiff asks:

1. That on the first cause of action, the defendant(s) be removed from above premises and that the plaintiff be restored to the possession thereof;
2. That on the second cause of action, the plaintiff asks judgment against the defendant(s) in the amount of \$ \_\_\_\_\_ together with interest from the date of commencement of this action plus costs and disbursements of this action **and for such other relief as is just and equitable.**

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Plaintiff/Plaintiff's Attorney\_\_\_\_\_  
Address\_\_\_\_\_  
State Bar No.\_\_\_\_\_  
Telephone No.

Plaintiff / \_\_\_\_\_  
 Petitioner: \_\_\_\_\_  
 -VS- \_\_\_\_\_

### Affidavit of Nonmilitary Service

Defendant / \_\_\_\_\_  
 Respondent: \_\_\_\_\_

Case No. \_\_\_\_\_

I, the undersigned, being first duly sworn on oath, say that:

1. I am the ☐ plaintiff/petitioner or ☐ plaintiff's/petitioner's attorney in this case.
2. This affidavit is made for the purpose of obtaining a default judgment against the above named defendant/respondent.
- ☐ 3. I believe the defendant/respondent is not on active military duty at this time because (choose one):
  - ☐ I know the defendant/respondent personally and s/he has never given any indication that s/he is in service with the United States military or National Guard.
  - ☐ I contacted the defendant/respondent, who informed me on [Date] \_\_\_\_\_ that s/he is not on active duty at this time.
  - ☐ I see the defendant/respondent regularly and therefore believe s/he is not on active duty at this time.
  - ☐ Other personal knowledge: \_\_\_\_\_
- ☐ 4. I obtained a certificate from the United States Department of Defense website showing that the defendant/respondent ☐ **is** ☐ **is not** on active duty status. This certificate is attached.
- ☐ 5. I have attempted to determine military status but do not have sufficient information. I have no reason to believe s/he is on active duty at this time. Describe efforts made: \_\_\_\_\_

State of \_\_\_\_\_  
 County of \_\_\_\_\_  
 Subscribed and sworn to before me on \_\_\_\_\_

Notary Public/Court Official

Name Printed or Typed

My commission/term expires: \_\_\_\_\_



Plaintiff/Petitioner (Do not sign until you are under oath)

Name Printed or Typed of Plaintiff/Petitioner



Plaintiff's/Petitioner's Attorney

Name Printed or Typed of Plaintiff's/Petitioner's Attorney

Date

Plaintiff / \_\_\_\_\_  
 Petitioner: \_\_\_\_\_  
 -VS- \_\_\_\_\_

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State of \_\_\_\_\_  
 County of \_\_\_\_\_  
 Subscribed and sworn to before me on \_\_\_\_\_

Notary Public/Court Official

Name Printed or Typed

My commission/term expires: \_\_\_\_\_

\_\_\_\_\_  
 Plaintiff/Petitioner (Do not sign until you are under oath)

\_\_\_\_\_  
 Name Printed or Typed of Plaintiff/Petitioner

\_\_\_\_\_  
 Plaintiff's/Petitioner's Attorney

\_\_\_\_\_  
 Name Printed or Typed of Plaintiff's/Petitioner's Attorney

\_\_\_\_\_  
 Date

Plaintiff / \_\_\_\_\_  
 Petitioner: \_\_\_\_\_  
 -VS- \_\_\_\_\_

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 Respondent: \_\_\_\_\_

Case No. \_\_\_\_\_

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State of \_\_\_\_\_  
 County of \_\_\_\_\_  
 Subscribed and sworn to before me on \_\_\_\_\_

Notary Public/Court Official

Name Printed or Typed

My commission/term expires: \_\_\_\_\_

\_\_\_\_\_  
 Plaintiff/Petitioner (Do not sign until you are under oath)

\_\_\_\_\_  
 Name Printed or Typed of Plaintiff/Petitioner

\_\_\_\_\_  
 Plaintiff's/Petitioner's Attorney

\_\_\_\_\_  
 Name Printed or Typed of Plaintiff's/Petitioner's Attorney

\_\_\_\_\_  
 Date

**AFFIDAVIT OF SERVICE  
OF NOTICE  
TERMINATING TENANCY**

\_\_\_\_\_,  
Plaintiff,

vs.

Case No. \_\_\_\_\_

\_\_\_\_\_,  
Defendants.

STATE OF WISCONSIN )  
MILWAUKEE COUNTY ) SS

The undersigned, being first sworn, on oath deposes and says:

1. He/She is an adult resident of the State of Wisconsin and makes this affidavit upon personal knowledge.
2. Then he/she served the notice terminating tenancy (check appropriate box)

5 day notice

14 day notice

28 day notice

\_\_\_ day notice

filed in the above-entitled action upon the following person

\_\_\_\_\_

3. In the following manner (check appropriate box) on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_:

- a) Copy given to tenant personally.
- b) Copy given to member of tenant's family (14 or older), who was informed of the contents of the notice.
- c) Copy given to a person occupying or in charge of premises and copy mailed to tenant by regular and/or certified mail.
- d) Tenant not found after reasonable diligence – Copy posted o premises and mailed to tenant by regular and /or certified mail.

Attempts to personally deliver made at the following dates & times 1) \_\_\_\_\_

2) \_\_\_\_\_ 3) \_\_\_\_\_.

- e) Copy mailed to tenant by certified and/or registered mail.

Dated: \_\_\_\_\_

Subscribed and sworn to before me on  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_

Notary Public State of Wisconsin

My Commission expires \_\_\_\_\_

\_\_\_\_\_  
Landlord or Agent of Landlord