## Superior Court of California, County of Sacramento

Small Claims Unit

BIXBY, MARK J.

301 Bicentennial Circle, 300 Sacramento, CA 95826-2701

Phone: (916) 875-7514

## - NOTICE TO DEFENDANT -YOU ARE BEING SUED BY PLAINTIFF

To protect your rights, you must appear in this court on the trial date shown in the table below. You may lose the case if you do not appear. The court may award the plaintiff the amount of the claim and the costs. Your wages, money, and property may be taken without further warning from the court.

PLAINTIFFS/DEMANDANTE (Name, street address, and telephone number of each):

Expires:

NEW HOME BUILDING SUPPLY 5310 FRANKLIN BLVD. SACRAMENTO, CA 95820 Phone: (916) 455-3057

Fic. Bus. Name Stmt. No.:

1998; ACCT, NO. 53280.

amount demanded is more than \$2.500.00.

## AVISO AL DEMANDADO A USTED LO ESTAN DEMANDANDO

COURT COPY

Case No.: 99SC02108

Para proteger sus derechos, usted debe presentarse ante esta corte en la fecha del juicio indicada en el cuadro que aparece a conti-nuación. Si no se presenta, puede perder el caso. La corte puede decidir en favor del demandante por la cantidad del reclamo y los costos. A usted le pueden quitar su salario, su dinero, y otras cosas de su propiedad, sin aviso adicional por parte de esta corte.

DEFENDANTS/DEMANDADO (Name, street address, and telephone number of each):

DBA - MJB/BIXBY CONST. **1513 18TH STREET** SACRAMENTO, CA Phone: (916) 448-9797 See attached sheet for additional plaintiffs and defendants. PLAINTIFF'S CLAIM 1. a. Defendant owes me the sum of \$820.53, not including court costs, because: PAST DUE BALANCE OWING FROM OCTOBER b. 🔲 I have had an arbitration of an attorney-client fee dispute. (Attach Attorney-Client Fee Dispute Form (see form SC-101).) 2. This claim is against a government agency, and I filed a claim with the agency. My claim was denied by the agency, or the agency did not act on my claim before the legal deadline. (See form SC-150.) 3. a. I have asked defendant to pay this money, but it has not been paid. b. I have NOT asked defendant to pay this money because (explain): 4. This court is the proper court for the trial because [C] (In the box at the left, insert one of the letters from the list called "Venue Table" on the back of this sheet. If you select D, E, F, specify additional facts in this space): << VenueReason>> 5. I 🔲 have 🗹 have not filed more than one other small claims action anywhere in California during this calendar year in which the 6. I ☐ have ☑ have not filed more than 12 claims, including this claim, during the previous 12 months. a. I may talk to an attorney about this claim, but I cannot be represented by an attorney at the trial in the small claims court. b. I must appear at the time and place of trial and bring all witnesses, books, receipts, and other papers or things to prove my case. c. I have no right of appeal on my claim, but I may appeal a claim filed by the defendant in this case. d. If I cannot afford to pay the fees for filing or service by a sheriff, marshal, or constable, I may ask that the fees be waived. 8. I have received and read the information sheet explaining some important rights of plaintiffs in the small claims court.

(SIGNATURE OF PLAINTIFF)

## ORDER TO DEFENDANT

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

(TYPE OR PRINT NAME

You must appear in this court on the trial date and at the time shown in the box below if you do not agree with the plaintiff's claim. Bring all witnesses, books, receipts, and other papers or things with you to support your case,

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TRIAL	FECHA		DAY	DATE	TIME	DEPT.	PLACE	
DATE	DEL JUICIO	7	Thursday	04/08/1999	10:00 A.M.	86	301 Bicenternial Circle, Sacramento, CA 95826	
Filed on <i>(date)</i> : 03/03/1999				Michael M. Roddy, Clerk, by			B. West , Deputy.	

– The county provides small claims advisor services free of charge. Read the information on the reverse. —

Date: 03/03/1999

7. Lunderstand that