

AFFIDAVIT OF DEBT

TIPPECANOE SUPERIOR COURT No. 4

CAUSE NO. 79D04- _____ -SC- _____

Courthouse, 301 Main Street
Lafayette, Indiana 47901
Telephone: (765) 423-9266

Plaintiff 1 Defendant 1
Address Address
Address Address
City State Zip City State Zip
Telephone Telephone
Email Email

Plaintiff 2 Defendant 2
Address Address
Address Address
City State Zip City State Zip
Telephone Telephone
Email Email

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Comes now Affiant, and states: I am [] the Plaintiff OR [] designated full-time employee of the Plaintiff. I am of adult age and fully authorized by Plaintiff to make the following representations. I am familiar with the record keeping practices of Plaintiff. The following representations are true according to documents kept in the normal course of Plaintiff's business and/or within my personal knowledge:

1. Plaintiff: [] is the original owner of this debt OR [] has obtained this debt from _____ and the original owner of this debt was _____.

2. Defendant, has an unpaid balance of \$ _____ on account number _____ (last 4 digits only). This amount is due and owing to Plaintiff. This account was opened on _____. The last payment from Defendant was received on _____ in the amount of \$ _____.

3. The type of account is:
[] Credit card (Visa, MasterCard, department store, etc.) [] Utilities (telephone, electric, sewer, etc.)
[] Medical bill (doctor, dentist, hospital, etc.) [] Wages or professional services for work performed
[] Judgment issued by a court (copy attached to this Affidavit) [] Other (explain): _____

4. This account balance includes
[] Late fees in the amount of \$ _____ as of _____ (date)
[] Interest at the rate of _____% beginning on _____ (date)
[] Other (explain): _____

5. Plaintiff [] is not or [] is seeking attorney's fees (additional evidence will be presented to the Court before entry of judgment on attorney's fees).

6. Plaintiff believes that the Defendant is not a minor or incompetent individual.

If Defendant is an individual (not a sole proprietorship, partnership, corporation, etc.), Plaintiff states and declares that:

[] Defendant is not on active military service. This statement is based upon the following facts and information:
[] Search of Servicemembers Civil Relief Act website (https://www.dmdc.osd.mil/appj/scra/single_record.xhtml)
[] Other: _____

[] Plaintiff is not able to determine if the Defendant is on active military service. ("Active military service" includes full time duty in the military including the National Guard and reserves and, for members of the National Guard, service under a call to active service authorized by the President or Secretary of Defense. See definition of "military service" in the Servicemembers Civil Relief Act, as amended, 50 U.S.C.A Appx. § 521.)

I swear or affirm under the penalties of perjury that the foregoing representations are true.

_____, 20____
Date

Signature of Affiant