

# SMALL CLAIMS MOTION FOR ORDER OF PAYMENTS

JD-CV-159 New 12-17  
P.B. 24-30

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
[www.jud.ct.gov](http://www.jud.ct.gov)



## Instructions

1. Type or print legibly.
2. Submit the original to the clerk of court.

Name of case ( <i>Plaintiff v. Defendant</i> )		Docket number
Type of court <input type="checkbox"/> Judicial District <input type="checkbox"/> Housing Session	Address of court ( <i>Number, street, town and zip code</i> )	
Your name	Your address ( <i>Number, street, town, state and zip</i> )	Date
The <input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant    in the above entitled matter, requests that the court enter an order of payments in the amount of \$ _____ <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly		
Signed ( <i>Individual Attorney or self-represented party</i> )	Print or type name of person signing	Date signed

## Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on (date) \_\_\_\_\_ to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties of record who received or will immediately be receiving electronic delivery.

Name and address of each party and attorney that copy was or will be mailed or delivered to\*

\*If necessary, attach additional sheet or sheets with name and address which the copy was or will be mailed or delivered to.

Signed ( <i>Individual Attorney or self-represented party</i> )	Print or type name of person signing	Date signed
Mailing address ( <i>Number, street, town, state and zip code</i> )		Telephone number

## Order

The above motion having been presented to the court is hereby ordered:

☐ Granted.

☐ Denied.

In the amount of \$ \_\_\_\_\_ ☐ Weekly    ☐ Bi-weekly    ☐ Monthly

First payment is due on or before \_\_\_\_\_ and ☐ Weekly    ☐ Bi-weekly    ☐ Monthly thereafter.

Payments are to be made to: \_\_\_\_\_

By the court	Signed ( <i>Judge/Magistrate</i> )	Date signed
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### ADA NOTICE

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at [www.jud.ct.gov/ADA](http://www.jud.ct.gov/ADA).