

## **State of Connecticut - Superior Court** Small Claims Area At Manchester 410 Center Street

#### Manchester, CT 06040-

Telephone No.: (860) 647-9789 Fax Number: (860) 649-7219

December 23, 2003

THE COMMON AT SINNOTT FARM, INC. P.O. BOX 681 **BLOOMFIELD, CT 06002-**

## **Notice of Judgment or Disposition**

**Plaintiff** 

RE: Docket #: SCAH-149636

THE COMMON AT SINNOTT FARM, INC. VS. LESTER

THE COMMON AT SINNOTT FARM, INC.

Stipulated Judgment for the Plaintiff (Judgment by Agreement) On 12/23/2003

THE COURT FOUND JUDGMENT IN FAVOR OF THE PLAINTIFF(S). This means that the Defendant(s) lost the case and must pay the Damages and Costs as follows:

Damages and \$35.00 Costs for a total of The defendant(s) owes \$950.00

\$985,00

01/01/2004 have been ordered by the court. Payments of \$78.34 Monthly starting on This means that, starting on the above date, the defendant(s) must pay the above amount Monthly.

Judgment was entered in your favor against the defendant. It is important that you read this notice carefully.

The purpose of the small claims court is to resolve a claim between the parties. THE COURT DOES NOT COLLECT THE MONEY OWED YOU. The Court has ordered the defendant to pay you as shown above but it is your responsibility to enforce this order if the defendant fails to make the payment(s) as indicated.

If payments are not made as ordered, wages, bank accounts or other property of the defendant may be attached. In order to enforce the judgment when it is not adhered to, you must file an application for execution. A wage execution may issue ONLY if an order for installment payments is entered against the defendant. In order to prepare the execution you will need all of the information shown on this form plus an accurate record of payments made (if any) by the defendant up to the time you seek the execution.

The execution forms are available on-line at www.jud.state.ct.us or at the small claims clerk's office. The clerk will assist you in completing the forms if necessary. Once an execution is issued, IT WILL BE YOUR RESPONSIBILITY TO ARRANGE FOR A STATE MARSHAL TO SERVE THE EXECUTION. YOU MUST ALSO PROVIDE THE STATE MARSHAL WITH THE INFORMATION NEEDED TO BE SUCCESSFUL IN RECOVERING THE MONEY OWED YOU, such as the defendant's current address, bank, employer or other information.

Once a judgment is paid in full, the recovering party shall file a written satisfaction of judgment with the Court Clerk.

Payments to be made to:

THE COMMON AT SINNOTT FARM, INC.

P.O. BOX 681

**BLOOMFIELD, CT 06002-**



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149636

THE COMMON AT SINNOTT FARM, INC. P.O. BOX 681
BLOOMFIELD, CT 06002-

RE: Docket No SCAH-149636

THE COMMON AT SINNOTT FARM, INC. VS. LESTER

NOTICE TO PLAINTIFF

**Answer Date:** 

Monday, October 20, 2003

The defendant is required to file an answer on or before the answer date.

After the answer has been filed, the matter will be set for a hearing. If no answer is filed, either a default judgment will enter or a hearing in damages will be scheduled, as appropriate.

#### Small Claims Area At Manchester 410 Center Street Manchester, CT 06040-

Disposition

	ket #: SCAH-149636 THE COMMON AT SINNOTT FARM, INC. VS. LES			STER	STER Amount of Claim: \$1,725.00		
	DISPOSITION					<u> </u>	
	A. Judgment for the Pla	aintiff after Default without Hea	aring in Damages	G.	Judgment for the Defe	endant after Hearing	
	B. Judgment for the Pla	aintiff after Default with Hearin	g in Damages	П н.	Judgment for the Defe	endant	
15	C. Stipulated Judgmen	t for the Plaintiff		I.	Transferred to Civil D	ocket	
	D. Judgment for the Pla	aintiff after Hearing		J.	Dismissed Pursuant t	o P.B. Section 24-27	
	E. Dismissed			□ к.	Transferred To Anothe	er Court Location	
Γ	F. Withdrawn			L.	Judgment for the Plain	tiff	
<del></del>				z.	Other		
_							
[]	II. REASON FOR DECISION (Complete only if the case was contested.)						
7	<u> </u>	2 4 2					
<u> </u>	cerally reduce	from 500 to	200.				
23 _	Peralty reduced from 500 to 200.  SEE STIPULATION - DEFENDANT TO MAKE PAYMENTS IN  ACCORDANCE WITH STIPULATION. IF DEFENDANT DEFAULTS  IN ANY PAYMENTS PERVIRED UNDER STIPULATION PLANTIF  WILL BE ENTITLED TO REOPEN TUDEMENT AND AMEND						
~	Tullement Ann	NOUNT TO AD,	DAN ADI	SITIE	NAL- #130	20-70	
	TUDEMENT A	NOUNT - #800	0-FEE3.	AN1	1500 F	NE )	
II	II. DAMAGES AND COSTS		7			DEFENDANT "	
	. Damages:	\$ 950	Entry Fee	\$35.00	)	BE RESPONSI FOR ANY F.	
	Interest:	\$	Service.	\$		F44 TO	
	Atty Fees:	\$	Other	\$		REDPEN	
	TOTAL DAMAGES:	\$	TOTAL COSTS	\$	<b>t</b>	1.00	
	TOTAL AMOUNT OF DAM	MAGES AND COSTS:	\$			right	
1	IV. ORDER OF PAYMENT(S)  Total Amount above to be paid by:  Date  Payments of \$ 78.34 per week bi-week town month bi-month other are due commencing on:  Date  See Supulation						
	are due commencing on: Date						
S	igned:	0-1-	Date	): /	1. 2/12	Disposition	
		100		18	7/23/03	JD-CV-40J Rev. 5/2000	

JD-CV-40 Rev. 4-01 C.G.S. § 51-15

FOR COURT USE ONLY:

Jrs Baris

DOCKET NO. SC 4 - 🚟 ANSWER DATE

CONNECTICUT SUPERIOR COURT SMALL CLAIMS SESSION SMALL CLAIMS WRIT AND NOTICE OF SUIT Type or print legibly. Complete original and make one copy for each party to the action. Pr. Bk. § 24-1 et seq. File the original and all copies with the clerk. Also, include one "Instructions to Defendant" for each defendant and submit the appropriate entry fee. SMALL CLAIMS AREA LOCATION HOUSING SESSION AT JUDICIAL DISTRICT AT NAME ADDRESS AND ZIP CODE OF PLAINTIFF # NAME ADDRESS AND ZIP CODE OF PLAINTIFF #2 100131CAR AF T F TELEPHONE NO. (w/area code) # ("X" ONE) PARTNERSHIP TELEPHONE NO. (w/area code) ("X" ONE) LLC PARTNERSHIP LLC 242- 9123 INDIVIDUAL CORPORATION INDIVIDUAL CORPORATION ATTORNEY FOR PLAINTIFF(S) JURIS NO TELEPHONE NO. (w/area code) NAME ADDRESS AND ZIP CODE OF DEFENDANT #1 NAME ADDRESS AND ZIP CODE OF DEFENDANT #2 D Ē Ē TELEPHONE NO. (w/area code) TELEPHONE NO. (w/area code) ("X" ONE) LLC ("X" ONE) PARTNERSHIP PARTNERSHIP えんり ユリビースクリモ INDIVIDUAL CORPORATION ☐ INDIVIDUAL CORPORATION

YOU ARE BEING SUED.

THE ABOVE PLAINTIFF(S) CLAIMS YOU OWE PLUS COURT COSTS, FOR THE FOLLOWING REASONS:

ATTORNEY FOR DEFENDANT(S)

AMOUNT DUE

TOWN WHERE TRANSACTION/INJURY OCCURRED OR PREMISES LOCATED

TELEPHONE NO. (w/area code)

JURIS NO.

The undersigned, being duly swom, deposes and says that the signer has read the claim and, to the best of the signer's knowledge, information and belief, there is good ground to support it.

SIGNED TYPE IN NAME AND TITLE OF PERSON SIGNING AT LEFT Х Charles SUBSCRIBED AND SWORN TO BEFORE ME ON (Date) SIGNED (Clerk, Notary, Comm. of Sup.

The undersigned deposes and says:

#### MILITARY SERVICE AFFIDAVIT

that the undersigned is unable to determine whether or not the defendant(s) in this action are in the military or naval service of the United States. that the defendant is in the military or naval service of the United States. that no defendant in this action is in the military or naval service of the United States, and that, to the personal knowledge of the undersigned (state facts showing defendant is not in such service) SIGNATURE AND TITLE X

FOR COURT USE ONLY DATE ENTERED

SUBSCRIBED AND SWORN TO BEFORE ME ON (Date)

SIGNED (Clerk, Notary, Gomm. of Sup. Gt.)

SIGNED (Clerk) Х

DISTRIBUTION: ORIGINAL - Court

COPY 1- Defendant

COPY 2 - Defendant

COPY 3 - Plaintiff

2575