

# CASE FILING STATEMENT

(Two-Party Cases)

Please check the case type you are filing:

CIV:  Tort  Contract  Name Change  Paternity  Quiet Title  Claim and Delivery  
 Foreign Judgment  Administrative Appeal  Condemnation  Forcible Entry & Detainer  
 Habeas Corpus  Other Writ  Other

DIV:  Divorce\*  Annulment\*  Separate Maintenance\*

SMC:  Small Claims

**Complete a form for *each* additional Plaintiff or Defendant**

*This Statement is not retained in the court file.*

Plaintiff: The State of South Dakota  
Last/Business name First Middle Suffix

Physical Address: 500 E. Capitol City: Pierre State SD Zip: 57501

Mailing Address: same City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
mm dd yyyy

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ and/or Drivers license # \_\_\_\_\_ State \_\_\_\_\_

Employer ID (if Plaintiff is a business or other entity) \_\_\_\_\_

Attorney: Semmler Kara 605-773-3201  
Last First Phone #

Mailing Address: same City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Defendant: Scott Olson Digging, Inc.  
Last/Business name First Middle Suffix

Physical Address: 1906 Maple Drive City: Huron State SD Zip: 57350

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
mm dd yyyy

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ and/or Drivers license # \_\_\_\_\_ State \_\_\_\_\_

Employer ID (if Defendant is a business or other entity) \_\_\_\_\_

Attorney: \_\_\_\_\_  
Last First Phone #

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\* For cases involving divorce, child support, and paternity, you must include your Social Security Number.  
42 UJS 666(a)(13)(B),