## IN THE COUNTY COURT OF THE <u>EIGHTH</u> JUDICIAL CIRCUIT IN AND FOR <u>ALACHUA</u> COUNTY, FLORIDA 201 E. University Ave, Gainesville FL 32601 (352) 374-3636

	Case No.:
PLAINTIFF	Division:
-VS-	
DEFENDANT	DEFENDANT
Address	
City, ST, Zip	
Phone	Phone
STATEMENT OF CLAIM P	OR RETURN OF PROPERTY FROM PAWNBROKER
Plaintiff,	, sues defendant/pawnbroker
and says:	
1. This is an action for the return o	f stolen or misappropriated property pursuant to section
539.001, Florida Statutes.	
2. Plaintiff is the owner of the follo	wing described property:
3. The described property was stol	en or otherwise misappropriated from plaintiff on or about
	enforcement report outlining the theft/ misappropriation is
attached and incorporated into this state	
4. The described property is currer	ntly in the possession of defendant and is located at a pawnshop
as defined in section 539.001, Florida Sta	atutes, the address of which is:
5. The plaintiff has complied with t	he procedural requirements of section 539.001, Florida
Statutes. Specifically, plaintiff notified th	e pawnbroker of plaintiff's claim to the property:
by certified mail, return reco in person evidenced by a sig	
The notice contains a complete and	accurate description of the purchased or pledged goods and
was accompanied by a legible copy of th	e police report regarding the theft or misappropriation of the

property. No resolution between plaintiff and defendant pawnbroker could be reached within 10 days

after the delivery of the notice.

WHEREFORE, the plaintiff demands judgment for the return of the property. Plaintiff further asks this Court to award plaintiff the costs of this action, including reasonable attorneys' fees.

\* Fla. R. Gen. Prac. Jud. Admin 2.516 requires email service on all parties.

Dated:

Plaintiff Signature

Address	
Audiess	

\_\_\_\_\_

City, State, Zip Code\_\_\_\_\_

Phone \_\_\_\_\_

Email address \_\_\_\_\_

## STATE OF FLORIDA COUNTY OF ALACHUA

Sworn to (or affirmed) and subscribed before me by means of  $\Box$  physical presence or  $\Box$  online notarization on (date) \_\_\_\_\_, 20\_\_\_\_, by (affiant name)\_\_\_\_\_.

NOTARY PUBLIC or DEPUTY CLERK

{Print, type, or stamp commissioned name of notary or clerk}

\_ Personally known, OR

\_\_\_\_ Produced identification; Type of identification produced/ID#\_\_\_\_\_\_

Note to Clerk of Court and to Sheriff: Pursuant to section 539.001(15), Florida Statutes, filing fees and service fees are waived. Waiver does not require the filing of an indigency application.