

96-50

STATE OF WISCONSIN, CIRCUIT COURT, LA CROSSE COUNTY

For Official Use, La Crosse County WI  
**FILED**  
FEB 18 2014  
PAMELA RADTKE  
CLERK OF COURTS

Plaintiff: (Name [first, middle, last], Address, City, State, Zip)  
SCANEIDER WINDOW COVERING  
505 BRICK RD  
WEST SALEM WI 54669

See attached for additional plaintiffs

Amended

-vs-

To: Defendant(s) : (Name [first, middle, last], Address, City, State, Zip)  
JENNIFER H & ISRAEL MCKINNEY

See attached for additional defendants

**Summons and Complaint  
Small Claims**

Case No. 156 14SC410

- Claim for money (\$10,000 or less) 31001
- Return of property (replevin) 31003
- Eviction 31004
- Eviction due to foreclosure 31002
- Arbitration award 31006
- Return of earnest money 31008
- Tort/Personal injury (\$5,000 or less) 31010

If you require reasonable accommodations due to a disability to participate in the court process, please call 608-785-9705 at least 10 working days prior to the scheduled court date. Please note that the court does not provide transportation.

**SUMMONS**

**To the Defendant(s):**

You are being sued as described below. If you wish to dispute this matter:

You must appear at the time and place stated.

**AND/OR** (Clerk will circle one)

You must file a written answer and provide a copy to the plaintiff or plaintiff's attorney on or before the date and time stated.

If you do not appear or answer, the plaintiff may win this case and a judgment entered for what the plaintiff is asking.

When to Appear/File an Answer	
Date <u>March 21, 2014</u>	Time 9:00 AM
Place to Appear/File an Answer	
INTAKE COURT - 333 VINE STREET LA CROSSE COUNTY COURTHOUSE & LEC LA CROSSE, WI 54601 608-785-9705	
Date Summons Issued	Date Summons Mailed <u>2-18-14</u>

Clerk/Attorney Signature

**COMPLAINT**

**Plaintiff's Demand:**

The plaintiff states the following claim against the defendant(s):

1. Plaintiff demands judgment for: (Check as appropriate)

- Claim for Money \$ 3159.73
- Return of Earnest Money
- Eviction
- Return of property (replevin) (Describe property in 2 below.)
- Tort/Personal injury \$ \_\_\_\_\_
- Eviction due to foreclosure
- Confirmation, vacation, modification or correction of arbitration award.

(Not to include Wis. Stats. 425.205 actions to recover collateral.)

Plus interest, costs, attorney fees, if any, and such other relief as the court deems proper.

2. Brief statement of dates and facts: (If this is an eviction action and you are seeking money damages, you must also state that claim on this form.)

INSTALLED BLINDS AT DEFENDANTS HOME ON 1-30-14  
RECEIVED 2 DAD CHECKS

See attached for additional information. Provide copy of attachments for court and defendant(s).

**Verification:** Under oath, I state that the above complaint is true, except as those matters stated upon information and belief, and as to those matters, I believe them to be true.

I am:  plaintiff.  attorney for the plaintiff.

State of \_\_\_\_\_  
 County of \_\_\_\_\_  
 Subscribed and Sworn to before me on 2-18-14  
 \_\_\_\_\_  
 Notary Public/Notary Official  
 \_\_\_\_\_  
 Name Printed or Typed  
 My commission/term expires 13, 2017

Signature of Plaintiff or Attorney <u>Pamela Radtke</u>	Date <u>2-18-14</u>	Attorney's State Bar Number
Plaintiff's/Attorney's Telephone Number <u>608 780-2719</u>	Law Firm and Address	