

**FORM SCC 1**

**SMALL CLAIMS COURT OF GOMBE STATE  
LETTER OF DEMAND**

DATE:  
FROM:

.....  
OFFICE/WORK ADDRESS:.....  
RESIDENTIAL ADDRESS:.....  
.....  
PHONE NUMBER(S) AND E-MAIL .....

TO:

.....  
OFFICE/WORK ADDRESS:.....  
RESIDENTIAL ADDRESS: .....

SIR/MADAM

**DEMAND:**  
I hereby claim from you

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**(PLEASE STATE PARTICULARS)**

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Unless you comply with this demand within ten (10) days after receipt of this letter, a summons will be issued against you in the Small Claims Court.

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**CLAIMANT'S SIGNATURE**