

## FORM 1-SCC

## REPUBLIC OF THE PHILIPPINES

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 Plaintiff,

For: \_\_\_\_\_

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 Defendant.

x-----x

**STATEMENT OF CLAIM**  
***(HABLA NG PAGINGIL)***

1. The personal circumstances of the parties are as follows:  
*(Ang bawat panig ay ang mga sumusunod)*

NAME OF PLAINTIFF/S	SEX	AGE	CIVIL STATUS
<i>(Pangalan ng Naghahabla)</i>	<i>(Kasarian)</i>	<i>(Edad)</i>	<i>(Katayuang Sibil)</i>

(Put a check on any of the following)

*(Pumili sa mga sumusunod at lagyan ng tsek)*

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> INDIVIDUAL<br><i>(Tao/Indibidwal)</i> | <input type="checkbox"/> CORPORATION<br><i>(Korporasyon)</i>                 | <input type="checkbox"/> PARTNERSHIP<br><i>(Bakasan)</i> |
| <input type="checkbox"/> COOPERATIVE<br><i>(Kooperatiba)</i>   | <input type="checkbox"/> SOLE PROPRIETORSHIP<br><i>(Solong Pagmamay-ari)</i> |  |

## NATURE OF BUSINESS:

*(Uri ng Negosyo)* BANKING*(Bangko)* LENDING*(Pagpapautang)* OTHERS/PLEASE INDICATE \_\_\_\_\_*(Iba pang uri ng negosyo)*

## PLAINTIFF'S HOME ADDRESS:

*(Pahatirang Sulat sa Bahay ng Naghahabla)*

(City) \_\_\_\_\_

*(Lungsod)*

\_\_\_\_\_ Zip Code

(Province, if applicable) \_\_\_\_\_

*(Lalawigan, kung meron)*

\_\_\_\_\_ Zip Code

Telephone No. \_\_\_\_\_

*(Telepono Blg.)*

Cellphone No. \_\_\_\_\_

*(Selpon Blg.)*

## PLACE OF WORK: \_\_\_\_\_

*(Lugar ng Pinagtatrabahuan)*

Telephone No. \_\_\_\_\_

*(Telepono Blg.)*

Cellphone No. \_\_\_\_\_

*(Selpon Blg.)*

## NAME OF PLAINTIFF'S REPRESENTATIVE:

\_\_\_\_\_  
if applicable (must be a non-lawyer)*(Pangalan ng Kinatawan:)**(kung meron) [dapat hindi abogado]*

HOME ADDRESS: (City) \_\_\_\_\_

*(Pahatirang Sulat sa Bahay) (Lungsod)*

\_\_\_\_\_ Zip Code

(Province, if applicable) \_\_\_\_\_

*(Lalawigan, kung meron)*

\_\_\_\_\_ Zip Code

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
 (Telepono Blg.) (Selpon Blg.) (Selpon Blg.)

PLACE OF WORK: \_\_\_\_\_  
 (Lugar ng Pinagtatrabahuan)

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
 (Telepono Blg.) (Selpon Blg.)

NAME OF DEFENDANT/S \_\_\_\_\_ SEX \_\_\_\_\_ AGE \_\_\_\_\_ CIVIL STATUS \_\_\_\_\_  
 (Pangalan ng Hinahabla) (Kasarian) (Edad) (Katayuang Sibil)

INDIVIDUAL  CORPORATION  PARTNERSHIP  
 (Tao/Indibidwal) (Korporasyon) (Bakasan)

COOPERATIVE  SOLE PROPRIETORSHIP  
 (Kooperatiba) (Solong Pagmamay-ari)

DEFENDANT'S HOME ADDRESS:  
 (Pahatirang Sulat sa Bahay ng Hinahabla)

(City) \_\_\_\_\_ Zip Code \_\_\_\_\_  
 (Lungsod)

(Province, if applicable) \_\_\_\_\_ Zip Code \_\_\_\_\_  
 (Lalawigan, kung meron)

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
 (Telepono Blg.) (Selpon Blg.)

PLACE OF WORK: \_\_\_\_\_  
 (Lugar ng Pinagtatrabahuan)

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
 (Telepono Blg.) (Selpon Blg.)

## NAME OF DEFENDANT'S REPRESENTATIVE:

\_\_\_\_\_

if applicable (must be a non-lawyer)

(Pangalan ng Kinatawan:)

(kung meron) [dapat hindi abogado]

HOME ADDRESS: (City) \_\_\_\_\_

(Pahatirang Sulat sa Bahay) (Lungsod) \_\_\_\_\_ Zip Code

(Province, if applicable) \_\_\_\_\_

(Lalawigan, kung meron) \_\_\_\_\_ Zip Code

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_

(Telepono Blg.) (Selpon Blg.)

PLACE OF WORK: \_\_\_\_\_

(Lugar ng Pinagtatrabahuan)

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_

(Telepono Blg.) (Selpon Blg.)

**If more than one (1) defendant, list next defendant here:**

**(Kung higit sa isa (1) ang Hinahabla, ilagay ang susunod na hinahabla rito:)**

NAME OF DEFENDANT/S	SEX	AGE	CIVIL STATUS
(Pangalan ng Hinahabla)	(Kasarian)	(Edad)	(Katayuang Sibil)
<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> CORPORATION	<input type="checkbox"/> PARTNERSHIP	
(Tao/Indibidwal)	(Korporasyon)	(Bakasan)	
<input type="checkbox"/> COOPERATIVE	<input type="checkbox"/> SOLE PROPRIETORSHIP		
(Kooperatiba)	(Solong Pagmamay-ari)		

## DEFENDANT'S HOME ADDRESS:

(Pahatirang Sulat sa Bahay ng Hinahabla)

(City) \_\_\_\_\_

(Lungsod) \_\_\_\_\_ Zip Code

(Province, if applicable) \_\_\_\_\_  
 (Lalawigan, kung meron) \_\_\_\_\_ Zip Code

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
 (Telepono Blg.) (Selpon Blg.)

PLACE OF WORK: \_\_\_\_\_  
 (Lugar ng Pinagtatrabahuan)

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
 (Telepono Blg.) (Selpon Blg.)

NAME OF DEFENDANT'S REPRESENTATIVE:

\_\_\_\_\_  
 if applicable (must be a non-lawyer)  
 (Pangalan ng Kinatawan:)  
 (kung meron) [dapat hindi abogado]

HOME ADDRESS: (City) \_\_\_\_\_  
 (Pahatirang Sulat sa Bahay) (Lungsod) \_\_\_\_\_ Zip Code

(Province, if applicable) \_\_\_\_\_  
 (Lalawigan, kung meron) \_\_\_\_\_ Zip Code

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
 (Telepono Blg.) (Selpon Blg.)

PLACE OF WORK: \_\_\_\_\_  
 (Lugar ng Pinagtatrabahuan)

Telephone No. \_\_\_\_\_ Cellphone No. \_\_\_\_\_  
 (Telepono Blg.) (Selpon Blg.)

**\*Note:** If you need more space, you can write at the back of this Form.  
**(\*Tala:** Kung kailangan mo ng karagdagang patlang, maaari mong isulat sa likod ng Form na ito.)

2. Plaintiff claims the defendant owes him/her/it

₱ \_\_\_\_\_.

*(Ang Hinahabla ay umutang sa Naghahabla ng halagang)*

- (a) Why does the defendant owe plaintiff money?

*(Bakit ang Hinahabla ay nagkautang ng salapi sa Naghahabla?)*

\_\_\_\_\_  
\_\_\_\_\_. (If you need more space, please use the back page). *(Kung kailangan mo ng karagdagang patlang, maaaring gamitin ang likod ng pahinang ito.)*

- (b) When did this happen?

*(Kailan ito nangyari?)*

Date: \_\_\_\_\_  
*(Petsa)*

If no specific date, give the time period:

*(Kung walang tiyak na petsa, ibigay ang tantiyang panahon)*

Date started: \_\_\_\_\_

*(Petsa nagsimula)*

Through: \_\_\_\_\_

*(Hanggang)*

- (c) How did you compute the money owed to you? (Do not include court costs or fees)

\_\_\_\_\_  
*(Paano mo kinuwenta ang salaping inutang sa iyo?) [Hindi kasama ang bayad sa pagpapatala sa hukuman.]*

3. (a) Did you ask the defendant to pay you before you filed this case?

*(Siningil mo ba ang Hinahabla bago ka nagsampa ng kasong ito?)*

Yes  
*(Oo)*

No  
*(Hindi)*

If no, explain:

\_\_\_\_\_  
*(Kung hindi, ipaliwanag)*

(b) How did you ask the defendant?

*Paano mo sininigil ang Hinahabla?*

In person

*(Sa kanya mismo)*

By phone

*(Sa telepono)*

In writing

*(Sa sulat)*

Others (please specify) \_\_\_\_\_

*(Iba pa) [pakisulat kung paano]*

(c) When did you do this?

\_\_\_\_\_

*(Kailan mo ginawa ito?)*

4. What is your proof that defendant owes you money?

\_\_\_\_\_

*(Ano ang iyong katibayan o pruwera na ang Hinahabla ay may utang na salapi sa iyo?)*

5. Did you attach your proof to this form?

*(Iyo bang inilakip ang katibayan o pruwera sa Form na ito?)*

Yes

*(Oo)*

No

*(Hindi)*

6. Was this claim referred to the barangay?

*(Dumaan ba sa barangay ang paniningil na ito?)*

Yes

*(Oo)*

No

*(Hindi)*

Not Covered

*(Hindi sakop)*

State reason:

\_\_\_\_\_

*(Isulat ang dahilan)*

If yes, do you have a Certificate to File Action or a Compromise Agreement executed before the barangay? \_\_\_\_\_

*(Kung oo, meron ka bang Patunay sa Pagsampa ng Kaso o Kasunduan na isinagawa sa barangay?)*

**6-A. How many small claims cases have you filed within this calendar year prior to this present case, in this court station and in the entire country: \_\_\_\_\_**

***(Pang ilang kaso na itong isinampa mo sa loob ng kasalakuyang taon sa korte na ito at sa buong bansa?)***

7. By the filing of this action, plaintiff hereby waives any amount in excess of ₱200,000.00, excluding interest and costs.

*(Sa pagsampa ng kasong ito, ang Naghahabla ay isinusuko ang anumang halaga na higit sa ₱200,000.00, hindi kasama ang tubo at gastos sa pagsampa ng kasong ito.)*

**P R A Y E R**  
**(PAGSAMO)**

WHEREFORE, plaintiff respectfully prays for judgment ordering defen-dant to pay the amount of ₱ \_\_\_\_\_, with interest at the rate of \_\_\_\_\_% per annum/per month from \_\_\_\_\_ until fully paid.

*(DAHIL DITO, ang Naghahabla ay magalang na sumasamo na igawad ang kapasiyahang utusan ang Hinahabla na magbayad sa Naghahabla ng halagang ₱ \_\_\_\_\_, pati ang tubo na \_\_\_\_\_% bawat taon/ buwan simula \_\_\_\_\_ hanggang ganap o lubos na mabayaran ito.)*  
\_\_\_\_\_, \_\_\_\_\_, 20\_\_\_\_.

**FOR OFFICIAL USE ONLY (Para sa Opisyal na gamit lamang)**  
- To be accomplished by the Branch Clerk of Court-

*(Sasagutan ng Kawani ng Hukuman)*

1. Cause of action

- Check  
 Promissory Note  
 Contract  
 Oral  Written  
 Barangay Agreement  
 Others (Please specify):  
\_\_\_\_\_.

2. \_\_\_\_\_ Barangay conciliation required. If yes,  
\_\_\_\_\_ Certificate to File Action  
\_\_\_\_\_ Compromise Agreement  
attached.

\_\_\_\_\_ Barangay conciliation not required.  
Please state the reason):  
\_\_\_\_\_.

\_\_\_\_\_  
PLAINTIFF  
*(Naghahabla)*