

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
<http://www.courts.state.nh.us>

Court Name: _____
Case Name: _____
Case Number: _____
(if known)

AFFIDAVIT OF DAMAGES AND STATEMENT OF CLAIM

AFFIDAVIT OF DAMAGES

In accordance with rental payment records of the landlord regarding rental property located at:

Street Address

City, State, Zip

The landlord asserts that the tenant is in arrears in payment of rent in the amount of \$ _____ as of _____. The landlord seeks to recover the arrearage amount plus costs in the amount of \$ _____, associated with filing and service fees.

STATEMENT OF CLAIM

The landlord/plaintiff claims that the tenant/defendant has failed to make payments on the following due dates:

Due Date	Amount Due	Amount Paid
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

Date

Plaintiff's Signature

State of _____, County of _____

This instrument was acknowledged before me on _____ by _____

My Commission Expires _____

Signature of Notarial Officer / Title

Affix Seal, if any