UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

_____

_____

Write the first and last name of each plaintiff.

Case No. _____ CV _____

-against-

**NOTICE OF MOTION FOR
DEFAULT JUDGMENT**

_____

_____

_____

_____

Write the first and last name of each defendant.

Plaintiff _____

requests that the Court grant Plaintiff's motion for default judgment.

_____   _____
Executed on (date)   Signature

_____   _____
Name   Prison Identification # (if incarcerated)

_____   _____
Address   City   State   Zip Code

_____   _____
Telephone Number (if available)   E-mail Address (if available)

_____

_____
Write the first and last name of each plaintiff.

Case No. _____ CV _____

-against-

DECLARATION IN SUPPORT OF MOTION FOR DEFAULT JUDGMENT

_____

_____

_____

_____
Write the first and last name of each defendant.

Declaration in Support of Motion for Default Judgment

I, _____ , declare under penalty of perjury that the

following facts are true and correct:

1. I am the self-represented plaintiff in this action.

2. I make this declaration under Rule 55.1 and 55.2(a) of the Local Civil Rules for the Southern District of New York in support of my motion for default judgment.

3. This is an action to recover $ _____ owed by defendant(s) to plaintiff. I am also seeking _____ _____.

4. I have included a Statement of Damages attached to this motion, which includes all the relief I seek.

5. The Court has subject matter jurisdiction of my claims under:

☐ Federal Question (28 U.S.C. § 1331) and/or ☐ Diversity of Citizenship (28 U.S.C. § 1332).

6. I commenced this action on _____ by filing the complaint. Copies of the summons and complaint were served on defendant

_____ on

_____ by ☐ U.S. Marshals or ☐ personal service. A

proof of service was filed on _____. The defendant

_____ has not filed a response to the complaint

and the time to respond has expired.

7. Defendant _____ is not an infant or incompetent.

8. Defendant _____ is not currently serving in the United States military.

_____	_____
Executed on (date)	Signature
_____	_____
Name	Prison Identification # (if incarcerated)
_____	_____
Address	City State Zip Code
_____	_____
Telephone Number (if available)	E-mail Address (if available)

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

_____

_____

   Write the first and last name of each plaintiff.

Case No. _____ CV _____

-against-

STATEMENT OF DAMAGES

_____

_____

_____

   Write the first and last name of each defendant.

Principal Amount: $ _____

Interest at _____% from _____, 20____ through _____ ____, 20____

Principal + Interest $ _____

Litigation Costs:

Filing fees for this action: $ _____

Process Server fee for service, if any: $ _____

Total as of _____, 20___ $_____

Any other relief you are seeking _____

_____

_____.

ATTACH THE CLERK'S CERTIFICATE OF DEFAULT HERE

IF YOU DO NOT HAVE A CLERK'S CERTIFICATE, YOU ARE NOT READY TO FILE A MOTION FOR DEFAULT JUDGMENT

PLEASE READ THE INSTRUCTIONS FOR FILING A MOTION FOR DEFAULT JUDGMENT

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

_____

_____

  Write the first and last name of each plaintiff.

                          -against-

_____

_____

_____

  Write the first and last name of each defendant.

Case No. _____ CV _____

PROPOSED DEFAULT JUDGMENT

Plaintiff filed a complaint on _____. Defendant

_____ was served with copies of the summons and

complaint on _____ by ☐ U.S. Marshals or ☐ by Plaintiff.

A proof of service was filed on _____. The defendant

_____ has not filed a response to the complaint and the time to

respond has expired.

The Court has reviewed the attached declaration of Plaintiff _____

dated _____, and the Clerk's Certificate of Default, noting the default

of the defendant _____ for failure to appear, answer,

or respond to the complaint.

Accordingly,

☐ It is ORDERED that this matter be referred to United States Magistrate Judge

_____ for an inquest to determine the damages sustained by

Plaintiff, including interests and costs, and any other relief Plaintiff seeks.

☐ It is ORDERED that this matter be scheduled for an inquest before this Court to

determine the damages sustained by Plaintiff, including interests and costs, and any

other relief Plaintiff seeks.

SO ORDERED.

Dated:
New York, New York

_____

United States District Judge

_____

_____

Write the first and last name of each plaintiff.

Case No. _____ CV _____

-against-

CERTIFICATE OF SERVICE

_____

_____

_____

_____

Write the first and last name of each defendant.

I, _____ ,

affirm that the foregoing documents have been personally served on

_____ or mailed to the last

known address of _____ _____,

at_____.

_____   _____
Executed on (date)   Signature

_____   _____
Name   Prison Identification # (if incarcerated)

_____   _____
Address   City   State   Zip Code

_____   _____
Telephone Number (if available)   E-mail Address (if available)