IN THE	JUSTICE COURT IN	COUNTY
PLAINTIFF(s))	
)) Case No.	
) SUMMONS/COMP SMALL CLA	
vs. DEFENDANT(s))))	
)))	
)))	
)	
TWENTY (20) DAYS the claims Diale it in the Small Claims Di	NDANT(S): YOU ARE DIRECTED TO ANS laim made against you. Write your answer in a vision of the Court named above. Failure to gment being entered against you.	the space below and
Date:	Clerk:	
	PLAINTIFF'S COMPLAINT	
The Defendant owes me:		
The incident occurred at:	Address, City, County	
On or about: as	stated:	
Date:	Plaintiff:	

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DEFENDANT'S ANSWER

I do not owe the Plaintiff because:		
Date:	Defendant:	
NOTICE O	F SERVICE	
NOTICE	r SERVICE	
Plaintiff: I certify that I will serve or mail (by certified mail) this complaint to the defendant.	Defendant: I certify that I will serve or mail this answer to the plaintiff at the stated address.	
By: Date:	By: Date:	

WARNING: YOU DO NOT HAVE THE RIGHT TO APPEAL THE DECISION OF THE HEARING OFFICER OR THE JUSTICE OF THE PEACE IN A SMALL CLAIMS COURT. IF YOU WISH TO PRESERVE YOUR RIGHT TO APPEAL, YOU MAY HAVE YOUR CASE TRANSFERRED TO THE JUSTICE COURT PURSUANT TO ARS §22-504, SUBSECTION A, IF YOU REQUEST SUCH TRANSFER AT LEAST TEN DAYS PRIOR TO THE DAY OF THE SCHEDULED HEARING.

NOTE: Requests for reasonable accommodation for persons with disabilities must be made to the small claims clerk by parties at least three (3) judicial days in advance of a hearing.

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