IN THE EIGHTEENTH JUDICIAL DISTRICT, DISTRICT COURT, SEDGWICK COUNTY, KANSAS Small Claims Department

Judgment Creditor:					
VS.			Case No.		
Judgment Debtor Nam	ne:				
Address:					
City:	State:	Zip Code:			
Pursuant to Chapter 6	1 of Kansas Statutes Annot	ated			
		REQUEST FOR	HEARING		
	cause the money or propert		, , ,	•	ise it is (state reason property
Judgment Debtor Nam	ne:				
	ature:				
Address:					
City:	State:	Zip Code:			
Telephone No. :					
Date:					
	*******	******	******	******	***
	THIS SECTION S	SHALL BE COMPLETED B	Y CLERK OF THE D	ISTRICT COURT:	
The hearing requeste	d shall be held on the	(day) of	(month),	(year), at	(time) o'clock (am/ pm).
	*******	*******	******	******	***
		Certificate o	f Service		
	ne above request for hearing lelivery or first-class mail in				ent creditor is represented by below:
Name of Judgment Cre	editor or Judgment Creditor	's Attorney:			
Address of Judgment (Creditor or Judgment Credit	or's Attorney:			
Manner delivered:	Hand-Delivery	First-Class Mail			
Date delivered:					
Signature of Judgment	t Debtor:				