

**CIVIL INFORMATION SHEET**

The civil information sheet neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Clerk of the District Court for the purposes of initiating the civil docket sheet. This information will not be available to the public and this document will be stored in a separate location from the case file and then destroyed within a reasonable time. A new case **will not be accepted** without a cover sheet attached. (THIS FORM MUST BE TYPED OR PRINTED LEGIBLY)

**SMALL CLAIMS**

JUDGMENT DEMAND: \$ \_\_\_\_\_

SUMMONS ATTACHED: ☐ YES ☐ NOSERVICE BY: ☐ PROCESS SERVER ☐ SHERIFF IN STATE \_\_\_\_\_ County ☐ SHERIFF OUT OF STATE \_\_\_\_\_ StateSHERIFF'S PROCESS FEE ATTACHED: ☐ YES ☐ NO**PLAINTIFF INFORMATION**NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ SEX: \_\_\_\_\_  
SSN: \_\_\_\_\_ DOB: \_\_\_\_\_  
ALIAS NAMES USED: \_\_\_\_\_**DEFENDANT INFORMATION**NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ SEX: \_\_\_\_\_  
SSN: \_\_\_\_\_ DOB: \_\_\_\_\_  
ALIAS NAMES USED: \_\_\_\_\_**ADDITIONAL PLAINTIFF INFORMATION (IF NEEDED)**NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ SEX: \_\_\_\_\_  
SSN: \_\_\_\_\_ DOB: \_\_\_\_\_  
ALIAS NAMES USED: \_\_\_\_\_**ADDITIONAL DEFENDANT INFORMATION (IF NEEDED)**NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ SEX: \_\_\_\_\_  
SSN: \_\_\_\_\_ DOB: \_\_\_\_\_  
ALIAS NAMES USED: \_\_\_\_\_**ADDITIONAL PLAINTIFF INFORMATION (IF NEEDED)**NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ SEX: \_\_\_\_\_  
SSN: \_\_\_\_\_ DOB: \_\_\_\_\_  
ALIAS NAMES USED: \_\_\_\_\_**ADDITIONAL DEFENDANT INFORMATION (IF NEEDED)**NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_ SEX: \_\_\_\_\_  
SSN: \_\_\_\_\_ DOB: \_\_\_\_\_  
ALIAS NAMES USED: \_\_\_\_\_

IN THE EIGHTEENTH JUDICIAL DISTRICT  
DISTRICT COURT, SEDGWICK COUNTY, KANSAS  
CIVIL DEPARTMENT

\_\_\_\_\_  
(Print Name) Plaintiff(s)

\_\_\_\_\_  
(Address) (Phone Number)

\_\_\_\_\_  
(City) (State) (Zip Code)  
VS

\_\_\_\_\_  
(Print Name) Defendant(s)

\_\_\_\_\_  
(Address) (Phone Number)

\_\_\_\_\_  
(City) (State) (Zip Code)

CASE NO. \_\_\_\_\_



**PETITION**  
**(Small Claims Procedure)**

PURSUANT TO CHAPTER 61 OF  
KANSAS STATUTES ANNOTATED

**INSTRUCTIONS TO PLAINTIFF:**

1. State the claim you have against the defendant(s) in the space provided. Be clear and concise.
2. Your total claim against the defendant(s) may not exceed \$4,000, not including interest, costs, and damages awarded under K.S.A. 60-2610 and amendments thereto. If you are seeking the recovery of personal property, the value of that property shall be based on your estimate of its value under oath.
3. You must be present in person at the hearing in order to avoid default judgment against you on any claim defendant(s) may have which arises out of the transaction or occurrence which is the subject to your claim against the defendant(s).
4. You must make demand for judgment in one or both of the spaces provided below.
5. Except as provided by law, neither you nor the defendant(s) is permitted to appear with an attorney at the hearing.
6. You may not file more than twenty (20) small claims under the small claims procedure act in this court during any calendar year.
7. After completing this form, you must subscribe to the following oath.

**STATEMENT OF CLAIM:** Plaintiff, having read the instructions above, asserts the following claim against the above defendant(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DEMAND FOR JUDGEMENT:**

Based on the claim stated above, judgment is demanded against defendant(s) as follows:

1. Payment of \$ \_\_\_\_\_, plus interest, costs and any damages awarded under K.S.A. 60-2610 and amendments thereto.

2. Recovery of the following described personal property, plus costs: \_\_\_\_\_

\_\_\_\_\_ This property has an estimated value of \$ \_\_\_\_\_.

I, \_\_\_\_\_ hereby swear that, to the best of my knowledge and belief, the foregoing claim asserted against the defendant (including the estimate of value of any property sought to be recovered) is a just and true statement, exclusive of any valid claim or defense which defendant may have.

\_\_\_\_\_  
Plaintiff's Signature

Subscribed and sworn to before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Judge (Deputy Clerk or Notary)

☐ Indicate this box to request conventional sheriff or process server service of the summons and not certified mail service. If you do not mark this box the sheriff may make certified mail service or you may make certified mail service. Follow strict terms of the "returns" on the summons forms if you make the service yourself.

REASONABLE ACCOMMODATIONS WILL BE PROVIDED IN ACCORDANCE WITH THE AMERICANS WITH DISABILITIES ACT.

IN THE EIGHTEENTH JUDICIAL DISTRICT  
DISTRICT COURT, SEDGWICK COUNTY, KANSAS  
CIVIL DEPARTMENT

(Print Name) \_\_\_\_\_ Plaintiff(s)

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_  
VS

(Print Name) \_\_\_\_\_ Defendant(s)

(Address) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

CASE NO. \_\_\_\_\_

**SUMMONS**  
**(Small Claims Procedure)**

**To the above-named defendant:**

You are hereby notified that the above-named plaintiff has filed a claim against you under the small claims procedure of this court. The statement of plaintiff's claim and demand for judgment against you are set forth in the petition which is served upon you with this summons.

A trial will be held on this matter at \_\_\_\_\_ o'clock \_\_\_\_\_ .m., on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

in **Courtroom 302, 3rd floor, Historic Courthouse, 510 N Main, Wichita, Kansas.**

You must be present in person at the trial or a judgment by default will be entered against you. Except as otherwise provided by law, neither you nor the plaintiff is permitted to appear with an attorney.

If your defense is supported by witnesses, books, receipts or other papers, you should bring them with you at the time of the hearing. If you wish to have witnesses summoned, see the clerk of the court at once for assistance.

If you admit the claim, but desire additional time to satisfy plaintiff's demands, you must be present at the trial and explain the circumstances to the court.

If you have a claim against the plaintiff, which arises out of the transaction or occurrence which is the subject of plaintiff's claim and your claim does not exceed \$4,000, you must complete the form for "Defendant's Claim," which accompanies this summons, and return it to the judge or clerk of the court on or before the time set for the trial. If your claim against plaintiff exceeds \$4,000, you may complete and return the form for "Defendant's Claim" on or before the time set for trial.

**To the Sheriff of Sedgwick County, Kansas,**

This summons must be served and your return of service made promptly; in any event, your return is due no later than five days, excluding intervening Saturdays, Sundays and holidays, before the date stated in the summons for the defendant to either appear or plead to the petition.

Dated: \_\_\_\_\_, 20\_\_\_\_\_



Clerk of the District Court of Sedgwick County, Kansas

**REASONABLE ACCOMMODATIONS WILL BE  
PROVIDED IN ACCORDANCE WITH THE  
AMERICANS WITH DISABILITIES ACT.**

By \_\_\_\_\_, Deputy

**RETURN ON SERVICE OF SUMMONS**

I hereby certify that I have served this summons:

(1) (Personal Service.) By delivering a copy of the summons and a copy of the petition to each of the following defendants on the dates indicated:

\_\_\_\_\_, 20\_\_\_\_\_

(2) (Residence Service.) By leaving a copy of the summons and a copy of the petition at the usual place of residence of each of the following defendants on the dates indicated:

\_\_\_\_\_, 20\_\_\_\_\_

(3) (No Service.) The following defendants were not found in this county: \_\_\_\_\_



D C 1 8

I declare (verify, certify or state) under penalty of perjury that the foregoing return of service is true and correct.

Executed on \_\_\_\_\_

SIGNATURE OF LAW ENFORCEMENT OFFICER

PRINT NAME OF LAW ENFORCEMENT OFFICER



\_\_\_\_\_  
Plaintiff(s)

VS

\_\_\_\_\_  
Defendant(s)

PURSUANT TO CHAPTER 61 OF  
KANSAS STATUTES ANNOTATED

CASE NO. \_\_\_\_\_

**DEFENDANT'S CLAIM**  
**Small Claims Procedure**

**INSTRUCTIONS:**

1. As stated in the summons, if you have a claim against the plaintiff which arises out of the transaction or occurrence which is the subject of plaintiff's claim and your claim does not exceed \$4,000, you must state your claim in the space provided below. If your claim against the plaintiff exceeds \$4,000, you may state your claim in the space provided below. In determining whether or not your claim against the plaintiff exceeds \$4,000, do not include interest, costs and any damages under K.S.A. 60-2610 and amendments thereto, but do include the value of any personal property sought to be recovered as determined by your estimate of its value under oath.

2. Be clear and concise in stating your claim.

3. If the value of your claim exceeds \$4,000 (not including interest, costs and any damages awarded under K.S.A. 60-2610 and amendments thereto, but including the value of any personal property sought to be recovered, as determined by your estimate of its value under oath), the court must decide whether you may pursue your entire claim or only that portion not exceeding \$4,000.

4. If your claim exceeds \$4,000 and the court determines that you may not pursue the entire claim at the hearing, you have three alternatives: (1) Make no demand for judgment and reserve the right to pursue your entire claim in a court of competent jurisdiction; (2) Make demand for judgment of that portion of your claim which does not exceed \$4,000 and reserve the right to bring an action in a court of competent jurisdiction for any amount in excess thereof; or (3) Make demand for judgment of that portion of your claim which does not exceed \$4,000 and waive your right to recover any excess.

5. When completed, this form must be filed with the judge or the clerk of the court on or before the time stated in the summons for the trial.

**STATEMENT OF CLAIM:**

I, \_\_\_\_\_, having read the instructions above, assert the following claim  
against: \_\_\_\_\_, plaintiff: \_\_\_\_\_

**DEMAND FOR JUDGMENT:**

Based on the claim stated above, judgment is demanded against plaintiff as follows:

1. Payment of \$ \_\_\_\_\_, plus interest, costs, and any damages awarded under K.S.A. 60-2610 and amendments thereto.

2. Recovery of the following described personal property, plus costs: \_\_\_\_\_

\_\_\_\_\_  
This property has an estimated value of \$ \_\_\_\_\_.

I, \_\_\_\_\_, hereby swear that, to the best of my knowledge and belief, the above claim asserted against the plaintiff (including the estimate of value of any property sought to be recovered) is a just and true statement.

\_\_\_\_\_  
Defendant's Signature

Subscribed and sworn to before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Judge (Clerk or Notary)

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

Plaintiff name: \_\_\_\_\_

vs

Defendant Name: \_\_\_\_\_

Case No. \_\_\_\_\_

**REQUEST AND SERVICE INSTRUCTION FORM**

Please issue a: \_\_\_\_\_

In this action for: \_\_\_\_\_

Whose address for service is: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Service requested as indicated below (check one):

☐

1. Service through the sheriff of \_\_\_\_\_ county, state of \_\_\_\_\_

☐

2. Service by an authorized process server

☐

3. Certified mail with a return receipt service by the undersigned litigant who understands their responsibility to make the return to the clerk.

The postal green card for service must be filed with the Clerk's office to prove service.

Filers Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone No: \_\_\_\_\_

E-mail: \_\_\_\_\_