Exhibit A

For office use only

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	○ NO		
SERVICE BY: PROCESS SERVER	SHERIFF IN STATECou	nty SHERIFF OUT OF STA	State
SHERIFF'S PROCESS FEE ATTACHED:	○ YES ○ NO		
PLAINTIFF INFORMATION		DEFENDANT INFORMATION	
NAME:		NAME:	
ADDRESS:		ADDRESS:	
	EX:	PHONE:	SEX:
	DB:	SSN:	DOB:
ALIAS NAMES USED:		ALIAS NAMES USED:	
ADDITIONAL PLAINTIFF INFORMATION NAME:	· · · · · · · · · · · · · · · · · · ·	ADDITIONAL DEFENDANT INFORM	· · · · · · · · · · · · · · · · · · ·
ADDRESS:		ADDRESS:	OFV.
PHONE: SE	X:	PHONE:	
SSN: DC ALIAS NAMES USED:		SSN: ALIAS NAMES USED:	
ADDITIONAL PLAINTIFF INFORMATION	I <u>(IF NEEDED)</u>	ADDITIONAL DEFENDANT INFORM	ATION (IF NEEDED)
NAME:		NAME:	
ADDRESS:		ADDRESS:	
PHONE: SE	EX:	PHONE:	SEX:
	DB:	SSN:	DOB:
ALIAS NAMES USED:		ALIAS NAMES USED:	

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

(Print Name)		Plaintiff(s)	
·			
(Address)		(Phone Number)	
(City)	(State)	(Zip code)	
			CASE NO
V.			
(Print Name)		Defendant(s)	
(Address)		(Phone Number)	
(City)	(State)	(Zip code)	D C 1 8
Pursuant to Chapter 61	of Kansas Statutes Annot	ated	
		SMALL CLAIMS PETIT Under K.S.A. 61-2701, e	
E. Except as provided to F. You may not file more G. After completing this 1. STATEMENT OF CL	demand for judgment in pa by law, neither you nor the re than 20 small claims und s form, you must sign it und	aragraph 2A, 2B, or both of the petition. defendant can have an attorney with you duler the small claims procedure act in this Coler penalty of perjury. serts the following claim against the above	ourt during any calendar year.
Based on the claim A. Payment of \$, plus interest,	nt the Court to order?): s judgment against Defendant: costs, and any damages awarded under K. costs:	
			. This property has an estimated value of \$
I, stated above against D defense Defendant ma	efendant (including the est	, declare under p imated value of any property I am asking to	penalty of perjury that, to the best of my knowledge and belief, the claim precover) is a just and true statement, not including any valid claim or
Signature of Plaintiff			
Printed Name			
(e-mail address)			

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

Plaintiff					
Address					
City	State	Zip Code		0405.110	
/ .				CASE NO	
Defendant					
Address				 	
City	State	Zip Code			
Pursuant to Cl	hapter 61 of Kansas S	Statutes Annotated			
			SUMMO (Small Claims P		
To the above	-named Defendant:		(Siliali Cialilis F	rocedure)	
	as filed a claim again		aims procedure of this Co	urt. Plaintiff's written claim and demand for judgment against y	ou are stated in
A trial wil	l be held at County Courthouse, 5	o'clockM., 625 N Main, Wichita Kans	on sas, 67203.	(date), in courtroom 4-1, 4 th Floor of the	e District Court at
You must the trial.	be present in person at t	he trial or the Court will ente	er judgment against you. Ex	scept as provided by law, neither you nor the Plaintiff can have an attor	mey with you during
	to present witnesses, be Court as soon as possib		ers at the trial, you should bri	ng them with you to the trial. If you want to require witnesses to appear	r at the trial, see
If you admi	it the claim, but want add	litional time to satisfy Plainti	iff's demands, you must come	e to the trial to make this request and explain the circumstances to the	judge.
claim does not e	exceed \$4,000, you mus	t complete the form for "Defe	endant's Claim" which is inclu	(which means the same event or circumstance) of Plaintiff's claim aga uded with this summons, and return it to the Clerk of the Court on or be for "Defendant's Claim" on or before the time set for trial.	
Dated:			(seal)		
			(oodi)	Deputy Clerk	
			RETURN ON SERVICE	OF SUMMONS	
-			dant's Claim" in the following		
,	•	• •		tes indicated to each of the following defendants:	20
	rvice. By leaving a copy	.,	of the petition on the dates i	ndicated at the usual place of residence of each of the defendants:	. 20
(3) No Service.		s were not found in this cour			, 20
			, 20		, 20
Dated					
				SIGNATURE OF LAW ENFORCEMENT OFFICER	
				PRINTED NAME OF LAW ENFORCEMENT OFFICER	

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

Plaintiff			
Address			
City	State	Zip Code	
•	Oldio	2.6 0000	CASE NO
V.			
Defendant			
Address			
City	State	Zip Code	
City		•	D C 1 8
Pursuant to C	hapter 61 of Kansas S	Statutes Annotated	DEFENDANT'S CLAIM
Instructions	to Defendant:		
C. Yo D. If y ma E. If y F. Aft	currence (which means the ragraph 1. Do not include unust write your demand our claim exceeds \$4,000 as pursue your entire claim our claim exceeds \$4,000 1. Tell the judge the 2. Request judgmeamount over \$4 3. Request judgmeer completing this form, your completing this dispute.	interest, costs, and any dad for judgment in paragraph 0, you may state your clair m or only the portion not ex 0 and the judge decides the nat you wish to file your entert for the portion of your of 1,000; or ent for the portion of your or ou must sign it under penal read the instructions for	nce) of Plaintiff's claim against you and your claim does not exceed \$4,000, you must state your claim by writing in lages under K.S.A. 60-2610 when calculating whether your claim exceeds \$4,000. 2A, 2B, or both of Defendant's Claim above. and demand for judgment on this form. If the value of your claim exceeds \$4,000, the judge must decide whether you seding \$4,000 in small claims. you may only file a portion of your claim, you have three alternatives: a claim in a different case outside of small claims; or im that does not exceed \$4,000 and tell the judge that you wish to file a different case outside of small claims for any im that does not exceed \$4,000 and waive your right to file a different case.
Demand for	iudgment (What do vo	ou want the Court to o	
•		demand this judgment a	
A.	Payment of \$, plus interest, cos	, and any damages awarded under K.S.A. 60-2610.
B.	Recovery of this pers	sonal property, plus cost	
			This property has an estimated value of \$
I,estimated val			ary that, to the best of my knowledge and belief, the claim stated above against Plaintiff (including the list and true statement, not including any valid claim or defense Plaintiff may have.
Signature of [Defendant		
•			

Email address: ____

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

Plaintiff n	ame:			
VS				
Defendar	nt Name:			
Case No.				
	REQUEST A	ND SERVICE INSTRUC	TION FORM	
Please is	sue a:			
In this ac	tion for:			
Whose a	ddress for service is:			
	City:	State:	Zip Code:	
1. 2. 3.	Service through the sheriff of Service by an authorized process server Certified mail with a return receipt service by the uncompostal green card for service must be filed with the	dersigned litigant who un	derstands their responsibility to	
Filers Sig	nature:			
Name:				
Address:				
City:	State: Zip Cod	e:		
Telephon	e No:			
E-mail: _				