PARKER JUSTICE COURT 1105 W ARIZONA AVENUE PARKER, ARIZONA 85344 (928) 669-2504

Plaintiff: (Name/Address/Phone)	Case Number:	Defendant: (Name/Address/Phone)
	MOTION	
() Oral Arguments Requ	uested () Ora	al Arguments NOT Requested
This motion is to ask the Court to:_		
For the following reasons:		
Dated	Plaintiff / D	Defendant
CERTIFICATE OF MAILING		
Copy mailed to Pl	aintiff Copy mailed to	Defendant
Date:	Rv:	