

**Parker Justice Court La Paz County, Arizona  
1105 W Arizona Avenue Parker, AZ 85344  
Phone (928) 669-2504 Fax (928) 669-2915**

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**Small Claims Request**

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Case Number: \_\_\_\_\_

Plaintiff's Name and Address: _____ _____ _____ ( ) - <u>Plaintiff's Phone Number</u>	Defendant's Name and Address: _____ _____ _____ ( ) - <u>Defendant's Phone Number</u>
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I am the  plaintiff  defendant in this action.

I am requesting a  telephonic hearing  continuance  other \_\_\_\_\_

I would like the court to grant this request because (please attach additional pages if necessary):

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

Optional: I have attached supporting documentation for my request.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**NOTICE:** Requests to reschedule your hearing or have a telephonic hearing must be made at least 15 days before the hearing date. You must appear at your scheduled hearing unless the court orders otherwise.

I certify that a copy of this document will be provided by  hand-delivery  first-class mail  
 electronic means on \_\_\_\_\_ to all other parties to the lawsuit.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Filing Party's Signature