Person Filing:

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Address (if not protected):

City, State, Zip Code:

Telephone:

Email Address:

Representing [ ] Self or [ ] Lawyer for

Lawyer’s Bar Number:

 **JUSTICE COURT, ARIZONA**

**PRECINCT NAME/ADDRESS/PHONE**

|  |  |  |
| --- | --- | --- |
|  ( )  Appellant Name / Address / Phone / Emailv. |  | Case Number: Lower Case Number: **[ ] APPELLANT MEMORANDA****[ ] APPELLEE RESPONSE MEMORANDA****[ ] ORAL ARGUMENT REQUESTED** |
|  ( )  Appellee Name / Address / Phone / Email |  |  |

STATEMENT OF THE CASE:

STATEMENT OF THE FACTS:

STATEMENT OF ISSUES PRESENTED FOR APPEAL:

REASONS WHY THE JUSTICE COURT RULED INCORRECTLY (INCLUDE ANY STATUTES OR AUTHORITY):

CONCLUSION:

CONCLUSION:

Date Signature

I CERTIFY that I delivered / mailed a copy of this [ ] APPELLANT MEMORANDA
[ ] APPELLEE RESPONSE MEMORANDA to:

[ ] Plaintiff at the above address [ ] Defendant at the above address

[ ] Plaintiff’s attorney at: [ ] Defendant’s attorney

 By:

Date Clerk