## IN THE SMALL CLAIMS COURT OF SPARKS TOWNSHIP COUNTY OF WASHOE, STATE OF NEVADA

This Application <u>must be personally served</u> with the Declaration of Complaint upon all defendants named in this Small Claims action.

Case No.:	
Dept. No.:	

## SMALL CLAIMS APPLICATION

TOL . (.CC.N.)	
Physical Address(es):	
Telephone No(s):	Email Address(es):
Defendant Name(s):	
Physical Address(es):	
	Email Address(es):
Resident Agent Name (if applicable):	
	(Do not include costs incurred filing and/or serving this lawsuit.)
Summary of why you believe defendant	t(s) owe(s) the amount listed above:
Have you and this person ever sued each	h other before?  Yes No When/Where?
	luding names, dates, and locations (attach separate page if more space is needed):

## APPLICATION (Cont.)