

Pinal County Justice Courts, State of Arizona

APPELLANT'S MEMORANDUM

Case Number: _____

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Appellant	Appellee
Name / Address / Phone	Name / Address / Phone

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Appellant Attorney	Appellee Attorney
Name / Address / Phone	Name / Address / Phone

ORAL ARGUMENT REQUESTED

STATEMENT OF THE CASE (Status of the Case):

STATEMENT OF FACTS:

STATEMENT OF ISSUES PRESENTED FOR APPEAL:

REASONS WHY THE LOWER COURT RULED INCORRECTLY (include statutes or authority):

CONCLUSION:

Date: _____

Signature: _____

CERTIFICATE OF MAILING

I CERTIFY that I mailed a copy of this DESIGNATION OF RECORD to:

Appellant Appellant's Attorney or Appellee Appellees's Attorney at the address listed above.

Date: _____

By Appellant: _____