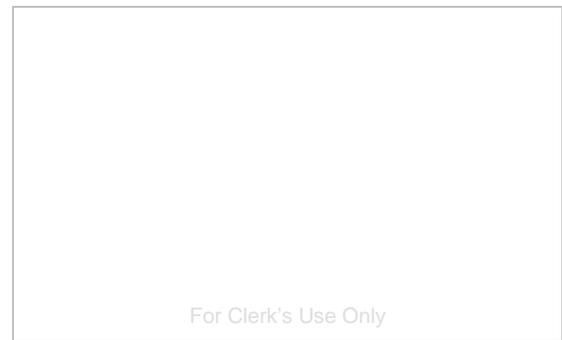


Name: _____
Mailing Address: _____

Daytime Telephone _____
Representing Self, Without a Lawyer



IN THE SUPERIOR COURT OF ARIZONA, YAVAPAI COUNTY

Regarding the matter of

_____ 1300 DO CV _____

WITNESS & EXHIBIT LIST

Petitioner/Plaintiff
and

Respondent/Defendant

I am the [] Petitioner/Plaintiff or [] Respondent/Defendant in this case.

MY LIST OF WITNESSES: Here is a list of the people I want to call as witnesses in my case to tell the judge what they know about my case.

1. Petitioner/Plaintiff.
2. Respondent/Defendant.
3. All witnesses listed by the other party(s).
4. Name of Witness: _____ Phone #: _____
Address of Witness: _____
Description of what this person will tell the judge: _____

5. Name of Witness: _____ Phone #: _____
Address of Witness: _____
Description of what this person will tell the judge: _____

6. Name of Witness: _____ Phone #: _____
Address of Witness: _____
Description of what this person will tell the judge: _____

7. Name of Witness: _____ Phone #: _____
Address of Witness: _____
Description of what this person will tell the judge: _____

8. I reserve the right to add to my list of witnesses if I learn about a witness that I did not know about when I filed this list of witnesses.

MY LIST OF EXHIBITS: Here is the list of the documents I want the Judge to consider at my trial.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

7. Any and all exhibits listed by the other party.

8. I reserve the right to add to my list of exhibits if I learn about the existence of an exhibit after I have filed this list of exhibits.

I state under penalty of perjury that the statements and information provided above are true and correct.

Date

Signature

I promise under oath that I am doing the following things:

1. **I am filing the ORIGINAL** of my Witness and Exhibit List with the Clerk of Superior Court in Yavapai County on this date: _____.

2. **I am mailing a COPY** of my Witness and Exhibit List on this date _____ to the other party or his/her attorney at the following address:

Name of other party
or his/her attorney: _____

Address: _____

City, State, Zip: _____

Signed: _____
(You must sign here to tell the Court that you are doing these things.)