

IN THE DISTRICT COURT OF JOHNSON COUNTY, KANSAS  
SMALL CLAIMS DIVISION

Case No. \_\_\_\_\_  
Division No. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
Plaintiff

VS.

\_\_\_\_\_  
\_\_\_\_\_  
Defendant

**REQUEST AND SERVICE INSTRUCTION FORM**

To: Clerk of the District Court

Please issue a: \_\_\_\_\_

in this action for: \_\_\_\_\_

\_\_\_\_\_

whose address for service is: \_\_\_\_\_

\_\_\_\_\_

Service is requested as indicated below:

- A. Service through the Sheriff of \_\_\_\_\_  
County, State of \_\_\_\_\_. Returns may be faxed to  
(913) 715-3401 7 days a week – 24 hour a day.
- B. Service by an authorized process server.
- C. Certified mail with a Return Receipt service by the undersigned litigant or attorney, who  
understands that is their responsibility to obtain service and to make the return to the clerk.  
The postal “green card” for service must be filed with the Clerk’s office to prove service.
- D. Certified mail service by the Sheriff of Johnson County Kansas. Sheriff of Johnson County  
does not do Out-of-state service by certified mail.

Signature: \_\_\_\_\_

Pro Se: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone No. \_\_\_\_\_

Email: \_\_\_\_\_

ANSWER DATE: \_\_\_\_\_