

IN THE DISTRICT COURT OF JOHNSON COUNTY KANSAS  
CIVIL COURT DEPARTMENT

\_\_\_\_\_  
vs.

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

\_\_\_\_\_  
**APPEARANCE/ANSWER OF DEFENDANT  
(OTHER THAN EVICTION ACTIONS)**

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the defendant, \_\_\_\_\_  
\_\_\_\_\_(name), appears in person and/or by attorney  
\_\_\_\_\_.

Defendant: (Choose one of the following):

\_\_\_\_\_ Admits the allegations of the petition. The plaintiff may take judgment without further notice.

\_\_\_\_\_ Denies the allegations of the petition and requests fourteen (14) additional days to file an answer or other pleading. If no answer is filed within fourteen (14) days, plaintiff may take judgment without further notice.

\_\_\_\_\_ Denies the allegations of the petition and hereby sets out the following answer to the petition:

(a) Defendant admits paragraphs numbered \_\_\_\_\_ of the petition.

(b) Defendant denies paragraphs numbered \_\_\_\_\_ of the petition.

(c) Defendant specifies the following affirmative facts and defenses upon which he/she will rely at trial.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Defendant's Signature

Defendant's Attorney Signature

Street Address of Defendant

Street Address of Defendant's Attorney

City, State Zip

City, State Zip of Defendant

Phone of Defendant

Phone of Defendant's Attorney

E-Mail of Defendant (required)

E-Mail of Defense Attorney (required)

IN THE DISTRICT COURT OF JOHNSON COUNTY, KANSAS

\_\_\_\_\_  
Petitioner  
vs

Case No.  
Court No.

\_\_\_\_\_  
Respondent

**CERTIFICATE OF SERVICE AND MAILING**

On \_\_\_\_\_ a true copy of: APPEARANCE/ANSWER OF DEFENDANT  
was sent to the below listed parties by US prepaid postal mail and in addition to electronic  
delivery of email to the following addresses:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_

\_\_\_\_\_  
Filing Party's Signature or Digital Signature  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_