

IN THE DISTRICT COURT OF IOWA IN AND FOR \_\_\_\_\_ COUNTY

_____	)	Small Claims No. _____
	)	
_____	)	
	)	
Plaintiff(s),	)	
	)	
vs.	)	REQUEST FOR ORAL ARGUMENT
	)	
_____	)	
	)	
_____	)	
	)	
Defendant(s).	)	

I, \_\_\_\_\_ (name) \_\_\_\_\_, wish to request oral argument in the appeal of this small claims court decision pursuant to the Iowa Rule of Civil Procedure 1.907.(2). The decision being appealed was made on \_\_\_\_\_ (date) \_\_\_\_\_ and the notice of appeal was filed on \_\_\_\_\_ (date) \_\_\_\_\_.

These are the specific issues I want to talk about:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 (Signature of person requesting oral argument)