

IN THE SMALL CLAIMS COURT OF SPARKS TOWNSHIP
COUNTY OF WASHOE, STATE OF NEVADA

Plaintiff(s):

Address:

Phone:

Case No.:

Email:

Mediation date:

vs.

Defendant(s):

Resident Agent (if applicable) Name & Address:

Address:

Phone:

Email:

DECLARATION OF COMPLAINT

I, _____ (insert name) declare, either upon knowledge or information and belief, that defendant(s) owe(s) the plaintiff(s) \$ _____, plus court costs, for the following reason(s):

I further declare that I have demanded payment of the above; that the defendant(s) refuse(s) to pay the amount.
I further declare that pursuant to NRS 73.010, this action shall be heard in the Sparks Township, County of Washoe, State of Nevada, because:

- Defendant(s) is/are a resident in the Sparks Township at the time the cause of action arose or at the time this complaint is filed;
- Defendant(s) does/do business in the Sparks Township at the time the cause of action arose or at the time this complaint is filed;
- Defendant(s) is/are employed in the Sparks Township at the time the cause of action arose or at this time this complaint is filed;
- This case involves injury to person or property, and Sparks Township is where the injury was committed; or
- This case involves a contract to perform an obligation, and the obligation is or was supposed to be performed in the Sparks Township.

Pursuant to NRS 53.045, I declare under penalty of perjury that the foregoing is true and correct.

Dated: _____
_____ Plaintiff Signature

ORDER

THE STATE OF NEVADA to the above-named defendant(s): **You are hereby ordered to appear for mandatory Mediation at the Sparks Justice Court located at 1675 E. Prater Way, Suite 107, Sparks, Nevada 89434 on _____ at _____ a.m.**

Date Reset for _____ at _____ a.m. Date Reset for _____ at _____ a.m.
Date Reset for _____ at _____ a.m. Date Reset for _____ at _____ a.m.

*****IMPORTANT*****

- Arrive 15 minutes before your mediation starts and check in with the **Civil Department**.
- Plaintiff(s) and defendant(s) **must** each bring all **exhibits** (papers, pictures, etc.) to your mediation.
- Failure to appear at this Mediation may result in the entry of a default judgment against the defendant.
- Please review "Other Important Information" on next page.

CERTIFICATE OF PERSONAL SERVICE

State of Nevada; County of Washoe:

I declare that at all times relevant, I was over 18 years of age and not a party to or interested in the above-captioned case; that I received a copy of the **Declaration and Order and Small Claims Application**, and that I served the same by delivering to and leaving with the following persons, at the address and on the date set forth opposite each name below, in Washoe County, Nevada:

Name of Person Served	Street Address and City Where Served	Date of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____

Place of Service was a business; residence of party served; other: _____

Fee for service \$ _____ plus mileage \$ _____ for a total cost of \$ _____.

Pursuant to NRS 53.045, I declare under penalty of perjury that the foregoing is true and correct.

Date	(Agency) Name	Signature of person making service	License Number
_____	_____	_____	_____

OTHER IMPORTANT INFORMATION

- NON-APPEARANCE:** This is an Order of the Court to Appear for Mediation in an action filed in the Sparks Township Small Claims Court. **If a defendant fails to appear for Mediation, Default Judgment may be entered against you in the amount plaintiff claimed, plus costs.** If a plaintiff fails to appear for Mediation, this case will be dismissed.
- SETTLEMENT:** The parties may communicate prior to the Mediation to make an out-of-court settlement. Contact the Sparks Justice Court’s Civil Department for information and available forms.
- DEFENSES:** If defendant wants to contest plaintiff’s claim, defendant **must appear** at the Sparks Justice Court for Mediation with all exhibits needed to establish a defense.
- EXHIBITS:** The parties must bring to the Mediation, an original and two copies of all exhibits (documents, photographs, papers, etc.) that you intend to ask the Court to review. Exhibits should be arranged chronologically and individually numbered if possible. You will provide one copy to the opposing party, one copy to the Court for filing, and you will keep one copy for yourself.
- COUNTERCLAIMS:** If defendant believes (A) the plaintiff owes you money, or (B) plaintiff’s claim should be reduced that plaintiff owes you, you may want to file a counterclaim. Counterclaims should be filed and served at least 7 calendar days prior to the mediation date. Forms can be found on the Sparks Justice Court Website.
- UNSUCCESSFUL MEDIATION:** If the Mediation is not successful, the Court will schedule this case for a future hearing date in front of a judge. The parties will file their exhibits with the Court at that time.
- EXEMPTIONS:** If a defendant is seeking exemption from Mediation, a written motion must be filed within 10 calendar days after being served with this Declaration and Order. The motion must be served to the plaintiff and a completed certificate of service must also be filed with the Court.
- COURT INFORMATION:** Please contact the Sparks Justice Court’s Civil Department at 775-353-7600, Ext. 3, with any questions.