



NOTICE OF PENDING COMPLAINT

New York State Professional Process Servers Association

TO: NYSPPSA MEMBER _____

COMPANY NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

This is to notify you that a complaint will be formally filed against you with the ARBITRATION & GRIEVANCE COMMITTEE of the **NEW YORK STATE PROFESSIONAL PROCESS SERVERS ASSOCIATION** for nonpayment of a debt:

COMPLAINING MEMBER _____

COMPANY _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

AMOUNT OF CLAIM _____ DATE OF ORIGINAL BILL _____

In accordance with the NYSPPSA Bylaws and Policy Manual, you have 14 days from the date of this **NOTICE OF PENDING COMPLAINT** to:

- (1) Make payment in full directly to me; OR
- (2) Make an agreeable arrangement with me for payment; OR
- (3) Dispute the matter and request Arbitration.

PLEASE NOTE that if you fail to exercise any of the above options, a formal Nonpayment Complaint will be filed against you with the ARBITRATION & GRIEVANCE COMMITTEE. Failure to cooperate with the Committee will constitute grounds for suspension, expulsion, or any sanction the NYSPPSA Board of Directors deems appropriate.

YOU ARE URGED TO MAKE EVERY EFFORT TO RESOLVE THIS MATTER !!!!

COMPLAINANT'S CERTIFICATION: I hereby certify that the above amount is presently owed to me and that I am a member (or was a member at the time this debt was incurred) of the **NEW YORK STATE PROFESSIONAL PROCESS SERVERS ASSOCIATION**; and as such, I am entitled to submit this claim for resolution in accordance with its Bylaws and Policy Manual through the ARBITRATION & GRIEVANCE COMMITTEE. I fully understand that NYSPPSA is not a collection agency and that this debt is 90 or more days old.

COMPLAINANTS SIGNATURE _____ DATE _____

INSTRUCTIONS TO COMPLAINANT: Complete this form and forward the original to the debtor and a copy to the Arbitration & Grievance Chairman. Additional information may be provided on a separate page. If the matter remains unresolved after 14 days from the date this notice was mailed to Respondent, complete a NONPAYMENT COMPLAINT and forward it with the required substantiation data to the ARBITRATION & GRIEVANCE COMMITTEE.

Bernard Hughes, Chair
Arbitration & Grievance Committee
P.O. Box 709
Valley Cottage, NY 10989
Phone: 845-268-8138
Fax: 845-267-0286
Email: bhughes@finestservices.com