

STATE OF NORTH CAROLINA  
 20A JUDICIAL DISTRICT  
 COUNTY OF \_\_\_\_\_

THE GENERAL COURT OF JUSTICE  
 DISTRICT COURT DIVISION  
 CASE NUMBER \_\_\_\_\_

\_\_\_\_\_, )  
**Plaintiff** )  
 )  
 )  
 -v- )  
 )  
 )  
 )  
 \_\_\_\_\_, )  
**Defendant**

**NOTICE OF HEARING  
 OF  
 SMALL CLAIMS APPEAL**

This **NOTICE OF HEARING** hereby advises you that this case is scheduled upon a notice of appeal to District Court from the Magistrate's judgment in Small Claims Court, as follows:

DATE \_\_\_\_\_  
 TIME \_\_\_\_\_ AM \_\_\_\_\_ PM  
 PLACE  Civil District Courtroom  \_\_\_\_\_  
 \_\_\_\_\_ County Courthouse  
 \_\_\_\_\_, NC

The case is scheduled for  mandatory pretrial conference  trial

If you are the plaintiff and fail to appear, your case may be dismissed. If you are the defendant and fail to appear, judgment may be entered against you. If the appealing party fails to appear on the trial date, the appeal may be dismissed and the magistrate's judgment affirmed.

Unless the court orders otherwise, the appeal will be tried upon the original pleadings as filed. No pleadings, other than the pleadings filed in the small claims court, should be filed unless a motion to re-plead is filed and allowed. Motions to re-plead will be freely allowed provided they are timely filed. All motions to re-plead and any motion to continue, to be considered timely filed, should be filed within ten days from the entry of notice of appeal or your receipt of the Notice.

A copy of this Notice has been provided to the District Court Judge's Office.

I HEREBY CERTIFY THAT A COPY OF THIS NOTICE OF HEARING HAS BEEN SERVED IN THE FOLLOWING MANNER:

- By depositing a copy in the United States mail in a properly addressed, postpaid envelope to:
  - Plaintiff at \_\_\_\_\_
  - Defendant at \_\_\_\_\_
  - Plaintiff's Attorney  Defendant's Attorney
- By delivering a copy by facsimile to:  Plaintiff  Defendant  Plaintiff's Attorney  Defendant's Attorney
- By delivering a copy personally to:  Plaintiff  Defendant  Plaintiff's Attorney  Defendant's Attorney
- By Sheriff's service to:  Plaintiff  Defendant  Plaintiff's Attorney  Defendant's Attorney

This the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
 Signature: Attorney/Party/Case Coordinator

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Address/Telephone Number