**ARPLY**

Attorney’s Name

Attorney’s Bar Number

Attorney’s Firm Name

Attorney’s Address

Attorney’s Phone Number

Party Attorney Represents

DISTRICT COURT

CLARK COUNTY, NEVADA

)

)

)

Plaintiff, )

)

v. ) CASE NO. A-

) DEPT NO.

)

Defendants. )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**REPLY/RESPONSE TO (Name of Pleading Responding to)**

(Plaintiff/Defendant) , by and through his attorney of record, , Esq. of the law firm of , and replies/responds to in the above entitled case: .

DATED this day of , 20\_\_.

ATTORNEY

BAR NUMBER

ADDRESS

PARTY

ARB FORM 34 (1 of 2)

CERTIFICATE OF SERVICE

I hereby certify that on the day of , 20\_\_, I mailed a copy of the foregoing REPLY/RESPONSE in a sealed envelope, to the following **counsel of record** **and Arbitrator** and that postage was fully prepaid thereon ***OR*** this document was served via E-Service:

EMPLOYEE OF ATTORNEY

ARB FORM 34 (2 of 2)