

JUSTICE COURT CIVIL FORMS
Updated (7-30-2020)

Abstract of Judgment
Civil Complaint
Civil Judgment
Civil Judgment, Agreed
Consolidate Actions for Trial

Civil and criminal contempt of court:

RJC 26 (Contempt of Court) provides: "Procedures in civil actions for contempt of court shall conform to Rule 32 of the Mississippi Rules of Criminal Procedure." See sample justice court forms for criminal proceedings at: <https://mjc.olemiss.edu/forms/>

Continuance and Order, Motion for
Correction of Clerical Errors and Order, Motion for
Correction of Clerical Errors, Notice of Motion for
Default Judgment
Default Judgment and Order, Motion to Set Aside
Default Judgment and Order, Notice of Motion to Set Aside
Default Judgment Against the Garnishee
Default Judgment Against the Garnishee, Show Cause Citation on
Dismissal of Action
Dismissal Action, Notice of Motion for
Dismissal of Counterclaim

Domestic abuse forms:

Domestic Violence Legal Forms may be accessed on the Mississippi Attorney General's Office website by opening "Interpersonal/Domestic Violence" under Bureau of Victim Assistance at: www.ago.state.ms.us/divisions/bureau-of-victim-assistance

Execution, Suggestion for
Execution, Writ of
Garnishment, Release of
Garnishment, Suggestion for
Garnishment, Writ of
Guardian ad litem, Appointment of
Guardian Ad Litem, Notice of Motion for Appointment of
Interpreter for Limited English Proficiency Individual and Order, Motion for an
Interpreter for Limited English Proficiency Individual, Notice of Motion for an
Interpreter for the Deaf or Hearing Impaired and Order, Motion for
Interpreter for the Deaf or Hearing Impaired, Notice of Motion for an
Judgment Debtor, Ex Parte Motion for Examination of
Judgment Debtor, Writ of Examination of
Juror questionnaire

Jury Trial, Demand for
Jury Trial, Notice of Demand for
Mistrial and Order, Motion for
Mistrial, Notice of Motion for
Recusal and Order, Motion for
Recusal, Notice of Motion for
Separate Actions for Trial
Service by Process Server, Request for
Summons and Complaint for Civil Action
Summons and Complaint, Notice of Returned
Summons to Be Reissued, Request for
Subpoena for Witness, Request for
Subpoena for Witness
Substantial Financial Hardship, Affidavit of
Substitution of Parties and Order, Motion for
Substitution of Parties and Order, Notice of Motion for
Waiver by Parties upon Remittal of Disqualification
Withdrawal of Counsel and Order, Motion for
Withdrawal of Counsel and Order, Notice of Motion for

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

ABSTRACT OF JUDGMENT

This Court rendered on the ____ day of _____, 20____, a regular civil term day of the court, the following judgment in the above-styled case:

JUDGMENT FOR:

PLAINTIFF DEFENDANT

JUDGMENT AMOUNT:

Court costs: \$ _____
Open account: \$ _____
Late fee: \$ _____
Total: \$ _____

Amount of judgment: \$ _____
Amount paid: \$ _____
Amount due: \$ _____

Case notes: (Record any significant details) _____.

I, _____, the JUSTICE COURT CLERK, do hereby certify that the above is a true and perfect abstract of the judgment in the above-styled case, and that it contains the names of all parties to the case, the judgment amount, and the date that the judgment was rendered. This same judgment, as appears from my docket, remains in full force and effect.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

(Seal)

=====

Filed, recorded and entered upon the judgment roll in my office, in conformity with law, this the ____ day of _____, 20____.

CIRCUIT OR COUNTY CLERK / D.C.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____. Receipt # of paid court costs _____.

Court date and time _____.

CIVIL COMPLAINT

Comes now _____, the PLAINTIFF, who files this CIVIL COMPLAINT for recovery of a debt, damages, or personal property in the amount of \$_____, such amount not exceeding \$3,500.00, plus court costs of \$_____, against the DEFENDANT(S) upon the following basis: (Specify the debt, statement of account, or other basis for the civil action, including the date and location of occurrence)

_____.

If a claim is founded on an account or other written instrument, a copy thereof should be attached to or filed with this complaint unless sufficient justification for its omission is stated herein.

PLAINTIFF

Plaintiff's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If plaintiff is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

Defendant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If defendant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

CIVIL JUDGMENT

WHEREAS this Court having conducted a trial on the civil complaint filed by the PLAINTIFF against the DEFENDANT in the above styled action, along with any counterclaims or set-offs asserted by the DEFENDANT against the PLAINTIFF that are within the jurisdictional limits of justice court,

IT IS HEREBY ORDERED:

- That the PLAINTIFF recover from the DEFENDANT the total sum of \$_____ with interest at the rate of _____ percent annum from this date, together with all costs of this action, for which let execution issue.

Judgment on complaint:	\$ _____
Minus judgment on counterclaim:	\$ _____
Plus costs of action:	\$ _____
Total sum due:	\$ _____

- That the DEFENDANT recover from the PLAINTIFF on the asserted counterclaim the sum of \$_____ with interest at the rate of _____ percent annum from this date, together with all costs of this action, for which let execution issue.

Judgment on counterclaim:	\$ _____
Minus judgment on complaint:	\$ _____
Plus costs of action:	\$ _____
Total sum due:	\$ _____

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

AGREED CIVIL JUDGMENT

WHEREAS this Court having accepted the agreed civil judgment between the PLAINTIFF and the DEFENDANT in the above styled action, a copy of which is attached to this order,

IT IS HEREBY ORDERED:

That the PLAINTIFF recover from the DEFENDANT the sum of \$_____ with interest at the rate of _____ percent annum from this date, together with all costs of this action, for which let execution issue.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

CONSOLIDATE ACTIONS FOR TRIAL

WHEREAS the following civil actions pending before this Court: (List the case numbers)

Case # _____

Case # _____

Case # _____

have a common question of law or fact, as follows: (Specify) _____,
and that consolidating them would avoid unnecessary costs or delay,

IT IS HEREBY ORDERED:

That the civil actions listed above, pursuant to Rule 20 of the Rules of Justice Court, be consolidated for trial.

Trial is scheduled in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

MOTION FOR CONTINUANCE

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

request this Court for a continuance for GOOD CAUSE, as follows: (Specify) _____.

THIS MOTION IS NOT FOR PURPOSES OF DELAY, BUT IS MADE SO THAT JUSTICE MAY BE DONE.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE OPPOSING PARTY,
AND IF REPRESENTED BY COUNSEL, THE OPPOSING PARTY'S ATTORNEY OF RECORD.

Movant

Movant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If movant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**ORDER ON
MOTION FOR CONTINUANCE**

WHEREAS this Court having considered the MOVANT'S attached motion for continuance this day in open court, and every effort being made to assure that the final disposition of this case is free from unreasonable delay,

IT IS HEREBY ORDERED:

- Granted. This Court finds that there is GOOD CAUSE for the continuance: (Specify) _____.
Trial is scheduled in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.
- Denied. This Court finds that there is NOT GOOD CAUSE for the continuance: (Specify) _____.
Trial is scheduled in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF MOTION FOR CONTINUANCE

TO _____, (PLAINTIFF / DEFENDANT)

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the MOVANT'S MOTION FOR CONTINUANCE in the above-styled case. This Court has scheduled a hearing on the motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court) _____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

MOTION FOR CORRECTION OF CLERICAL ERRORS

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

request this Court to correct the following clerical error(s): (Specify the judgment, order, or other parts of the record requiring correction of clerical error(s)) _____.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE OPPOSING PARTY,
AND IF REPRESENTED BY COUNSEL, THE OPPOSING PARTY'S ATTORNEY OF RECORD.

Movant

Movant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If movant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**ORDER ON
MOTION FOR CORRECTION OF CLERICAL ERRORS**

WHEREAS this Court having considered the MOVANT'S attached motion for correction of clerical errors this day in open court,

IT IS HEREBY ORDERED:

- Granted. I hereby direct the clerk to make the following correction: (Specify) _____.
- Denied.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF MOTION FOR CORRECTION OF CLERICAL ERRORS

TO _____, PLAINTIFF / DEFENDANT

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the MOVANT'S MOTION FOR CORRECTION OF CLERICAL ERRORS in the above-styled case. This Court has scheduled a hearing on the motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court) _____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

DEFAULT JUDGMENT

WHEREAS this Court having conducted a hearing in the above-styled case on the ____ day of _____, 20____, the DEFENDANT having been properly served pursuant to Rule 14 of the Rules of Justice Court, but failing to appear as summoned, and finding that there is a factual basis for the PLAINTIFF'S claim: (Specify) _____

IT IS HEREBY ORDERED:

That the PLAINTIFF recover from the DEFENDANT the sum of \$_____ with interest at the rate of _____ percent annum from the date of this judgment, together with all costs of this case, for which let execution issue.

THIS JUDGMENT IS NOT DIFFERENT IN KIND FROM OR
DOES NOT EXCEED THE AMOUNT OF THAT DEMANDED IN THE COMPLAINT.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

MOTION TO SET ASIDE DEFAULT JUDGMENT

I, the DEFENDANT in the above-styled case, request this Court to SET ASIDE THE DEFAULT JUDGMENT against me for the following reasons: (Specify) _____.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE PLAINTIFF
AND, IF REPRESENTED BY COUNSEL, THE PLAINTIFF'S ATTORNEY OF RECORD.

DEFENDANT

Defendant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If defendant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**ORDER ON
MOTION TO SET ASIDE DEFAULT JUDGMENT**

WHEREAS this Court having considered the DEFENDANT'S attached motion this day in open court, after a hearing pursuant to Rule 23(e) of the Rules of Justice Court, and having taken into consideration the following factors:

- (1) the nature and legitimacy of the party's reasons for default;
- (2) whether the party's claims or defenses have reasonable merit; and
- (3) the nature and extent of prejudice that the opposing party would suffer if the default judgment is set aside,

IT IS HEREBY ORDERED:

- Granted. This Court finds that there is GOOD CAUSE to set aside the default judgment, as follows: (Specify) _____.
Trial is scheduled in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.
- Denied. This Court finds that there is NOT GOOD CAUSE to set aside the default judgment.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF MOTION TO SET ASIDE DEFAULT JUDGMENT

TO _____, PLAINTIFF

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the DEFENDANT'S MOTION TO SET ASIDE DEFAULT JUDGMENT in the above-styled case. This Court has scheduled a hearing on the DEFENDANT'S motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court)

_____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the DEFENDANT'S motion must be filed with this Court by ____ day of _____, 20____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

DEFAULT JUDGMENT AGAINST THE GARNISHEE

WHEREAS this Court having conducted a show cause hearing against the GARNISHEE for the amount of the PLAINTIFF'S demand on the ____ day of _____, 20____, a regular civil term day of the Court, and the GARNISHEE failing to appear as summoned,

IT IS HEREBY ORDERED:

That the PLAINTIFF recover from the GARNISHEE the sum of \$_____ with interest at the rate of _____ percent annum from the date of this judgment, together with all costs of this case, for which let execution issue.

THE GARNISHEE MAY SUSPEND THE EXECUTION OF THIS JUDGMENT BY FILING A SWORN DECLARATION IN THIS COURT IN ACCORDANCE WITH SECTION 11-35-31 OF THE MISSISSIPPI CODE.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**SHOW CAUSE CITATION
ON DEFAULT JUDGMENT AGAINST THE GARNISHEE**

TO ANY LAWFUL OFFICER OF _____ COUNTY:

WHEREAS this Court having rendered a judgment in the above-styled case in favor of the PLAINTIFF on the ____ day of _____, 20____ for the sum of \$ _____ and costs, against the DEFENDANT, and the judgment having not been satisfied, and whereas _____, the GARNISHEE, having been lawfully served with a WRIT OF GARNISHMENT on the ____ day of _____, 20____, but failing to sufficiently answer the writ as required therein,

YOU ARE HEREBY COMMANDED:

TO SUMMONS: (Specify the name of the GARNISHEE and the address where summons is to be served)

TO APPEAR BEFORE THIS COURT on the ____ day of _____, 20____, at ____ o'clock ____ m. at:
(Specify the physical address of the justice court) _____

to show sufficient cause why a judgment should not be made final against the GARNISHEE for the sum of \$ _____, the amount of the PLAINTIFF'S demand,

BY PERSONALLY SERVING A COPY OF THIS WRIT ON THE GARNISHEE; and

TO PROMPTLY RETURN the served writ to the JUSTICE COURT CLERK OF THIS COURT.

Notice to Garnishee

YOU ARE TO BRING A COPY OF THIS SHOW CAUSE CITATION WHEN YOU APPEAR FOR THE HEARING. FAILURE TO SHOW CAUSE WHY JUDGMENT SHOULD NOT BE MADE FINAL WILL RESULT IN A JUDGMENT AGAINST YOU FOR THE AMOUNT OF THE PLAINTIFF'S DEMAND, AND FOR WHICH EXECUTION WILL ISSUE.

ORDERED AND ADJUDGED this the ____ day of _____, 20____.

JUSTICE COURT JUDGE

OFFICER'S RETURN:
STATE OF MISSISSIPPI, _____ COUNTY

I have this day served the above show cause citation in compliance with its terms and conditions.

DATE AND TIME THE CITATION WAS PERSONALLY SERVED ON THE GARNISHEE:
_____ at _____ o'clock ____ m.

_____	_____	_____	_____
OFFICER	AGENCY	BADGE NUMBER	DATE

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

DISMISSAL OF ACTION

WHEREAS,

- the PLAINTIFF, in the above styled case, had been given proper notice of the date and time of trial but failed to appear, and the DEFENDANT appeared as summoned,
- the PLAINTIFF and the DEFENDANT, in the above styled case, had been given proper notice of the date and time of trial but failed to appear,

IT IS HEREBY ORDERED:

That the PLAINTIFF'S action, pursuant to Rule 23 of the Rules of Justice Court, is dismissed without prejudice.

ORDERED AND ADJUDGED this the ____ day of _____, 20____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

PLAINTIFF'S MOTION FOR DISMISSAL OF ACTION

I, the PLAINTIFF in the above-styled case, request this Court to dismiss this civil action without prejudice pursuant to Rule 23(d) of the Rules of Justice Court.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE DEFENDANT
AND, IF REPRESENTED BY COUNSEL, THE DEFENDANT'S ATTORNEY OF RECORD.

PLAINTIFF

Plaintiff's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If plaintiff is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**ORDER ON
PLAINTIFF'S MOTION FOR DISMISSAL OF ACTION**

WHEREAS this Court having considered the PLAINTIFF'S attached motion this day in open court,

IT IS HEREBY ORDERED:

Granted.

Denied.

PLAINTIFF'S COSTS SHALL NOT BE ASSESSED AGAINST THE DEFENDANT.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF MOTION FOR DISMISSAL ACTION

TO _____, DEFENDANT

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the PLAINTIFF'S MOTION FOR DISMISSAL OF ACTION in the above-styled case. This Court has scheduled a hearing on the PLAINTIFF'S motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court)

_____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the PLAINTIFF'S motion must be filed with this Court by ____ day of _____, 20____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

DISMISSAL OF COUNTERCLAIM

WHEREAS the DEFENDANT'S counterclaim in the above-styled case exceeds the jurisdictional limits of justice court,

IT IS HEREBY ORDERED:

That the DEFENDANT'S counterclaim is dismissed without prejudice.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

SUGGESTION FOR EXECUTION

TO THE JUSTICE COURT OF _____ COUNTY:

I, the PLAINTIFF in the above-styled case, having received a judgment in this Court on the ____ day of _____, 20____, plus court costs, against the DEFENDANT upon which execution may issue, and the JUDGMENT HAVING NOT BEEN SATISFIED, as follows:

Amount of judgment:	\$ _____
Amount of principal and interest unpaid:	\$ _____
Earned court costs unpaid:	\$ _____
Court costs for this execution:	\$ _____
Total demand:	\$ _____

MAKE THIS SUGGESTION FOR EXECUTION UPON PROPERTY of the DEFENDANT, as follows:

(Specify) _____

WHEREFORE, I REQUEST this to Court issue a WRIT OF EXECUTION against the above specified property to satisfy the outstanding judgment, costs, and interest.

PLAINTIFF

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

Plaintiff's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If plaintiff is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

WRIT OF EXECUTION

TO ANY LAWFUL OFFICER OF _____ COUNTY:

YOU ARE HEREBY COMMANDED, of the real and personal estate of:

Defendant's name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

TO CAUSE TO BE MADE \$ _____, which amount remains unpaid by the DEFENDANT, as follows:

Amount of judgment: \$ _____

Amount of principal and interest unpaid: \$ _____

Earned court costs unpaid: \$ _____

Court costs for this execution: \$ _____

Total demand: \$ _____

TO HAVE SUCH MONIES before this Court on the ____ day of _____, 20_____, and
TO PROMPTLY RETURN the executed writ to the JUSTICE COURT CLERK OF THIS COURT.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

OFFICER'S RETURN:
STATE OF MISSISSIPPI, _____ COUNTY

I have this day executed the above writ in compliance with its terms and conditions, and caused to be made \$ _____, as follows: (Specify the proceedings taken to satisfy the writ)

_____ /
and which costs for the execution thereof are: (Specify each of the statutorily authorized costs)

OFFICER

AGENCY

BADGE NUMBER

DATE

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

RELEASE OF GARNISHMENT

TO _____, GARNISHEE:

WHEREAS this Court having rendered a judgment in the above-styled case in favor of the PLAINTIFF on the ____ day of _____, 20____, and having issued a WRIT OF GARNISHMENT on the ____ day of _____, 20____, to enforce that judgment, and: (Check one)

- the JUDGMENT HAVING BEEN FULLY SATISFIED,
- the DEFENDANT having been terminated from the employment of the GARNISHEE on the ____ day of _____, 20____, and any wages, salary, or other compensation due under the writ of garnishment having been disposed of or remitted as required by law,

IT IS HEREBY ORDERED:

That _____, the GARNISHEE, be released from garnishment in the above-styled case.

ORDERED AND ADJUDGED this the ____ day of _____, 20____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

SUGGESTION FOR GARNISHMENT

TO THE JUSTICE COURT OF _____ COUNTY:

I, the PLAINTIFF in the above-styled case, having received a judgment in this Court on the ____ day of _____, 20____, plus court costs, against the DEFENDANT upon which execution may issue, and the JUDGMENT HAVING NOT BEEN SATISFIED, as follows:

Amount of judgment:	\$ _____
Amount of principal and interest unpaid:	\$ _____
Earned court costs unpaid:	\$ _____
Court costs for this execution:	\$ _____
Total demand:	\$ _____

MAKE THIS SUGGESTION that:

Garnishee's name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

IS INDEBTED TO THE DEFENDANT, or has possession of property of the DEFENDANT, or knows of some other person who is indebted to the DEFENDANT, or knows of someone who has possession of property of the DEFENDANT; and further, I request this Court to issue a WRIT OF GARNISHMENT against the GARNISHEE to satisfy the outstanding judgment, costs, and interest.

PLAINTIFF

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

Plaintiff's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If plaintiff is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

WRIT OF GARNISHMENT

TO ANY LAWFUL OFFICER OF _____ COUNTY:

WHEREAS the PLAINTIFF in the above-styled case received a judgment in this Court, on the ____ day of _____, 20____, for the sum of \$ _____ and costs, against the DEFENDANT, and the JUDGMENT HAVING NOT BEEN SATISFIED, as follows:

Amount of judgment:	\$ _____
Amount of principal and interest unpaid:	\$ _____
Earned court costs unpaid:	\$ _____
Court costs for this execution:	\$ _____
Total demand:	\$ _____

and the PLAINTIFF having made a SUGGESTION FOR GARNISHMENT against:

Garnishee's name: _____.
Mailing address: _____.
Physical address, if different from mailing address: _____.
Email address: _____. Telephone: _____.

YOU ARE HEREBY COMMANDED:

TO SUMMONS: (Specify the name of the GARNISHEE and the address where summons is to be served)

to file an answer, on oath and in writing, by the ____ day _____, 20____, at: (Specify the physical address of the justice court) _____
to the questions contained in this writ,

BY PERSONALLY SERVING A COPY OF THIS WRIT ON THE GARNISHEE; and
TO PROMPTLY RETURN the served writ to the JUSTICE COURT CLERK OF THIS COURT.

Notice to Garnishee

YOU MUST FILE AN ANSWER TO THE FOLLOWING QUESTIONS AS DIRECTED BY THIS WRIT:

1. Are you presently indebted to the defendant? If the answer is yes then answer the following: What amount is the debt? When is the debt due? How is the debt evidenced? What interest does the debt bear?

2. Were you indebted to the defendant at or since the time of service of the writ on you? If the answer is yes then answer the following: What amount was the debt? When was the debt due? How was the debt evidenced? What interest did the debt bear?

3. Do you presently have possession or control of property of the defendant? If the answer is yes then list and describe any and all property of the defendant in your possession or control.

4. Did you have possession or control of property of the defendant at or since the time of the service of the writ on you? If the answer is yes then list and describe any and all property of the defendant that was in your possession or control at or since the time of the service of the writ on you.

5. Do you know of someone who is indebted to the defendant? If the answer is yes then answer the following: Who is the person indebted to the defendant? Where does this person reside?

6. Do you know of someone who has possession or control of property of the defendant? If the answer is yes then answer the following: Who is the person that has possession or control of property of the defendant? Where does this person reside?

7. Is the defendant your employee? If the answer is yes then answer the following: What is the time interval between pay periods for wages, salary, or other compensation of the defendant? What is the specific day of the week or month that the defendant is paid?

IF THE DEFENDANT IS YOUR EMPLOYEE, ANY WAGES, SALARY, OR OTHER COMPENSATION DUE IS TOTALLY EXEMPT FROM GARNISHMENT FOR A PERIOD OF THIRTY (30) DAYS FROM THE DATE OF THE SERVICE OF THIS WRIT. AFTER THAT TIME 75% OF ANY WAGES, SALARY OR OTHER COMPENSATION DUE OR TO BECOME DUE IS EXEMPT FROM GARNISHMENT. THE REMAINING NON-EXEMPT DISPOSABLE INCOME SHALL BE SENT TO THE PLAINTIFF AT THE FOLLOWING ADDRESS: _____.

If the DEFENDANT is terminated from your employment, you shall notify this Court and the PLAINTIFF within fifteen (15) days. Any wages, salary, or other compensation which has been withheld is to be remitted to the PLAINTIFF within fifteen (15) days after such termination of employment.

8. Are you a bank or other financial institution? What funds were on deposit between the time of service of this writ and the time of your answer? *See* Miss. Code. Ann. § 11-35-23(1)(b).

YOU ARE TO BRING THIS WRIT TO COURT WHEN YOU FILE YOUR ANSWER. FAILURE TO ANSWER, AS REQUIRED HEREIN, WILL RESULT IN A JUDGMENT AGAINST YOU FOR THE AMOUNT OF THE PLAINTIFF'S DEMAND, AND FOR WHICH EXECUTION WILL ISSUE.

ORDERED AND ADJUDGED this the ____ day of _____, 20____.

JUSTICE COURT JUDGE

OFFICER'S RETURN:
STATE OF MISSISSIPPI, _____ COUNTY

I have this day served the above writ in compliance with its terms and conditions.

DATE AND TIME THE WRIT WAS PERSONALLY SERVED ON THE GARNISHEE:

_____ at _____ o'clock ____ m.

OFFICER AGENCY BADGE NUMBER DATE

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

MOTION FOR APPOINTMENT OF GUARDIAN AD LITEM

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

request this Court to appoint, pursuant to Rule 17 of the Rules of Justice Court, a guardian ad litem who is an attorney to represent me in this action because: (Specify) _____.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE OPPOSING PARTY,
AND IF REPRESENTED BY COUNSEL, THE OPPOSING PARTY'S ATTORNEY OF RECORD.

Movant

Movant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If movant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**ORDER ON
MOTION FOR APPOINTMENT OF GUARDIAN AD LITEM**

WHEREAS this Court having considered the MOVANT'S attached motion this day in open court,

IT IS HEREBY ORDERED:

- Granted. This Court hereby appoints the following person as guardian ad litem to represent the MOVANT in this case:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

THE MOVANT IS INSTRUCTED TO IMMEDIATELY CONTACT THE GUARDIAN AD LITEM
APPOINTED BY THIS ORDER. REASONABLE COSTS AND FEES OF
THE GUARDIAN AD LITEM MAY BE TAXED AS COURT COSTS.

- Denied. This Court finds that the MOVANT is neither an infant nor a vulnerable person as defined under section 43-47-5 of the Mississippi Code.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF MOTION FOR APPOINTMENT OF GUARDIAN AD LITEM

TO _____, Specify PLAINTIFF or DEFENDANT.

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the MOVANT'S MOTION FOR APPOINTMENT OF GUARDIAN AD LITEM in the above-styled case. This Court has scheduled a hearing on the motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court)

_____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20_____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20_____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**MOTION FOR AN INTERPRETER FOR
LIMITED ENGLISH PROFICIENCY INDIVIDUAL**

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

being unable to readily understand or communicate in spoken English and consequently being unable to equally participate in or benefit from the proceedings unless an interpreter is made available to assist me, request this Court to appoint a qualified foreign language interpreter to interpret the proceedings to me, to interpret my testimony or statements, and to assist me in conversing with counsel.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE OPPOSING PARTY,
AND IF REPRESENTED BY COUNSEL, THE OPPOSING PARTY'S ATTORNEY OF RECORD.

Movant

Movant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If movant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**ORDER ON MOTION FOR AN INTERPRETER FOR
LIMITED ENGLISH PROFICIENCY INDIVIDUAL**

WHEREAS this Court having considered the MOVANT'S attached motion this day in open court,

IT IS HEREBY ORDERED:

- Granted. This Court, finding that the MOVANT is entitled to a foreign language interpreter pursuant to Rule 8 of the Rules of Justice Court, appoints the following qualified interpreter, who shall be entitled to reasonable fees and expenses as set forth in section 9-21-81 of the Mississippi Code:

Interpreter's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

THE MOVANT IS INSTRUCTED TO IMMEDIATELY CONTACT
THE QUALIFIED INTERPRETER APPOINTED BY THIS ORDER.

- Denied. This Court finds that the MOVANT understands and speaks English well enough to participate fully in the proceedings and to assist counsel or to be understood directly by counsel, court, and jury, as follows: _____.

ORDERED AND ADJUDGED this the ____ day of _____, 20____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**NOTICE OF MOTION FOR AN INTERPRETER FOR
LIMITED ENGLISH PROFICIENCY INDIVIDUAL**

TO _____, Specify PLAINTIFF or DEFENDANT.

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the MOVANT'S MOTION FOR AN INTERPRETER FOR LIMITED ENGLISH PROFICIENCY INDIVIDUAL in the above-styled case. This Court has scheduled a hearing on the motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court) _____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20_____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20_____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**MOTION FOR
INTERPRETER FOR THE DEAF OR HEARING IMPAIRED**

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

having a hearing impairment that is totally impaired, or so seriously impaired as to prohibit me from understanding oral communications when spoken to in a normal conversational tone, request this Court to appoint in the above-styled case a qualified interpreter of the deaf sign language to interpret the proceedings to me, to interpret my testimony or statements, and to assist in preparation with counsel.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE OPPOSING PARTY,
AND IF REPRESENTED BY COUNSEL, THE OPPOSING PARTY'S ATTORNEY OF RECORD.

Movant

Movant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If movant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**ORDER ON MOTION FOR
INTERPRETER FOR THE DEAF OR HEARING IMPAIRED**

WHEREAS this Court having considered the MOVANT'S attached motion this day in open court,

IT IS HEREBY ORDERED:

- Granted. This Court, finding that the MOVANT is entitled to an interpreter for the deaf or hearing impaired pursuant to Rule 8 the Rules of Justice Court, appoints the following qualified interpreter, who shall be entitled to reasonable fees and expenses as set forth in section 13-1-315 of the Mississippi Code:

Interpreter's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

THE MOVANT IS INSTRUCTED TO IMMEDIATELY CONTACT
THE QUALIFIED INTERPRETER APPOINTED BY THIS ORDER.

- Denied. This Court has GOOD CAUSE to believe that the MOVANT claiming to be entitled to an interpreter may not actually be deaf or hearing impaired. A hearing to determine the extent of that MOVANT'S handicap or disability and the bona fide need for interpreting services is to held in this Court on the ____ day of _____, 20____, at ____ o'clock __ m.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**NOTICE OF MOTION FOR
INTERPRETER FOR THE DEAF OR HEARING IMPAIRED**

TO _____, Specify PLAINTIFF or DEFENDANT.

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the MOVANT'S MOTION FOR INTERPRETER FOR THE DEAF OR HEARING IMPAIRED in the above-styled case. This Court has scheduled a hearing on the motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court)

_____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20_____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20_____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

EX PARTE MOTION FOR EXAMINATION OF JUDGMENT DEBTOR

I, the PLAINTIFF in the above-styled case, having obtained a final judgment against the DEFENDANT, a certified copy of which is attached to this motion, and such remaining wholly or partially unpaid, request this Court to order the DEFENDANT, pursuant to Rule 25(b) of the Rules of Justice Court, to appear in court for an EXAMINATION OF JUDGMENT DEBTOR and to provide at such time a full and complete response to the attached interrogatories and to produce copies of the following books, papers, or other documents relating to the DEFENDANT's property, as follows: (Specify) _____.

PLAINTIFF

Plaintiff's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If plaintiff is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**ORDER TO ISSUE SUMMONS
FOR EXAMINATION OF JUDGMENT DEBTOR**

WHEREAS this Court having considered, pursuant to Rule 25(b) of the Rules of Justice Court, the PLAINTIFF'S attached motion in the above-styled case,

IT IS HEREBY ORDERED:

That the DEFENDANT be summoned to appear before this Court on the ____ day of _____, 20____, at _____ o'clock ____ m., such being not less than five (5) working days from the date of service of the plaintiff's motion and this order, for an examination of judgment debtor and to provide at such time a full and complete response to the attached interrogatories and to produce copies of the following books, papers, or other documents relating to the defendant's property, to wit: (Specify)

_____.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

WRIT OF EXAMINATION OF JUDGMENT DEBTOR

TO ANY LAWFUL OFFICER OF _____ COUNTY:

YOU ARE HEREBY COMMANDED:

TO SUMMONS:

Defendant's name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

TO APPEAR BEFORE THIS COURT on the ____ day of _____, 20____, at ____ o'clock ____ m. at:
(Specify the physical address of the justice court) _____

for an examination of judgment debtor,
to provide a full and complete response to the attached interrogatories, and
to produce copies of the following books, papers, or other documents relating to the judgment debtor's
property, as follows: (Specify) _____

BY PERSONALLY SERVING A COPY OF THIS WRIT ON THE DEFENDANT; and
TO PROMPTLY RETURN the served writ to the JUSTICE COURT CLERK OF THIS COURT.

Notice to Defendant

YOU ARE TO BRING A COPY OF THIS WRIT WHEN YOU APPEAR FOR THE EXAMINATION OF
JUDGMENT DEBTOR. YOUR FAILURE TO COMPLY WITH THIS ORDER MAY RESULT IN A
SUMMONS BEING ISSUED FOR YOUR APPEARANCE BEFORE THIS COURT TO SHOW CAUSE
WHY YOU SHOULD NOT BE HELD IN CONTEMPT OF COURT.

ORDERED AND ADJUDGED this the ____ day of _____, 20____ at _____ o'clock ____ m.

JUSTICE COURT JUDGE

OFFICER'S RETURN:
STATE OF MISSISSIPPI, _____ COUNTY

I have this day served the above writ in compliance with its terms and conditions.

DATE AND TIME THE WRIT WAS PERSONALLY SERVED ON THE DEFENDANT:

_____ at _____ o'clock ____ m.

OFFICER AGENCY BADGE NUMBER DATE

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

_____ COUNTY JUSTICE COURT
(ADDRESS & TELEPHONE NUMBER OF COURT)

JUROR QUESTIONNAIRE

Fill out form in your own handwriting.

1. Name: _____
(Last) (First) (Middle)
2. Physical Address: _____
(Street Address)

(City or Town) (State) (Zip Code)
3. Mailing Address: _____
4. Telephone Number: _____
5. Date of Birth: _____
6. Are you a citizen of the U.S.? ___ Yes ___ No
7. Are you a resident of Mississippi? ___ Yes ___ No
8. Are you a resident of this County? ___ Yes ___ No
9. How long have you resided in this County? _____
10. Have you ever been convicted of a felony? ___ Yes ___ No
11. Are you presently a common gambler or an habitual drunkard? ___ Yes ___ No
12. Have you served as a juror in an actual trial within the last two (2) years? ___ Yes ___ No
13. If you have served as a juror in the last two (2) years, was it in this court? ___ Yes ___ No
14. Do you have a personal illness or a serious family illness or other emergency that would prevent you from serving as a juror? If so, explain: _____
15. Would serving as a juror cause you serious financial loss? If so, explain: _____
16. If you are a breast-feeding mother, do you wish to be exempt from serving as a juror?
___ Yes ___ No
17. If you are over the age of sixty-five (65), do you wish to be exempt from serving as a juror?
___ Yes ___ No

I hereby certify that the above information is true and correct:

Signed this the ___ day of _____, A.D., _____.

PROSPECTIVE JUROR

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

DEMAND FOR JURY TRIAL

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

demand a jury trial in this case pursuant Miss. Code Ann. § 11-9-143 and Rule 9 of the Rules of Justice Court.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE OPPOSING PARTY,
AND IF REPRESENTED BY COUNSEL, THE OPPOSING PARTY'S ATTORNEY OF RECORD.

Movant

Movant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If movant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

ORDER ON DEMAND FOR JURY TRIAL

WHEREAS this Court having considered the MOVANT'S attached demand in open court,

IT IS HEREBY ORDERED:

- Granted. The justice court clerk shall notify the circuit court clerk who shall issue summonses for a jury in the same manner as for circuit court, which shall be returnable to justice court.

- Denied. This Court finds that the demand for a jury trial was not timely made on or before the return day of process as required by Miss. Code Ann. § 11-9-143 and Rule 9 of the Rules of Justice Court.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF DEMAND FOR A JURY TRIAL

TO _____, Specify PLAINTIFF or DEFENDANT.

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the MOVANT'S DEMAND FOR A JURY TRIAL in the above-styled case. This Court has scheduled a hearing on the demand for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court) _____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20_____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20_____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

MOTION FOR MISTRIAL

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

request this Court to declare a mistrial in this case for the following reasons:

- For misconduct by the defendant, the defendant's attorney, or a defendant's witness during the trial resulting in substantial and irreparable prejudice to the plaintiff's action, to wit:
(Specify) _____.
- For misconduct by the plaintiff, the plaintiff's attorney, or a plaintiff's witness during the trial resulting in substantial and irreparable prejudice to the defense, to wit:
(Specify) _____.
- For reasons that the trial cannot proceed in conformity with law or the jury is deadlocked and there is no reasonable probability of a verdict, to wit:
(Specify) _____.

Movant

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE OPPOSING PARTY,
AND IF REPRESENTED BY COUNSEL, THE OPPOSING PARTY'S ATTORNEY OF RECORD.

Movant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If movant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

ORDER ON MOTION FOR MISTRIAL

WHEREAS this Court having considered the MOVANT'S attached motion this day in open court,

IT IS HEREBY ORDERED:

- Granted. This Court, pursuant to Rule 22 of the Rules of Justice Court, declares a mistrial in the above-styled case, to wit: (Specify) _____.
- Denied. This Court finds that a mistrial is not warranted under Rule 22 of the Rules of Justice Court or otherwise by law.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF MOTION FOR MISTRIAL

TO _____, Specify PLAINTIFF or DEFENDANT.

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the MOVANT'S MOTION FOR A MISTRIAL in the above-styled case. This Court has scheduled a hearing on the motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court) _____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20_____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20_____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

MOTION FOR RECUSAL

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

request that the JUSTICE COURT JUDGE assigned to hear the case enter a recusal order for the following reason(s): (Specify) _____.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE OPPOSING PARTY,
AND IF REPRESENTED BY COUNSEL, THE OPPOSING PARTY'S ATTORNEY OF RECORD.

Movant

Movant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If movant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

ORDER ON MOTION FOR RECUSAL

WHEREAS this Court having considered the MOVANT'S attached motion this day in open court, and every effort being made to assure that the final disposition of this case is free from unreasonable delay,

IT IS HEREBY ORDERED:

- Granted. I find that there is GOOD CAUSE under Canon 3E of the Mississippi Code of Judicial Conduct to recuse myself from hearing this case, as follows: (Specify) _____. Wherefore, I direct that it be assigned to another judge pursuant to Rule 7 of the Rules of Justice Court.

- Denied. I find that there is NOT GOOD CAUSE under Canon 3E of the Mississippi Code of Judicial Conduct to recuse myself from hearing this case, as follows: (Specify) _____. Trial is scheduled in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF MOTION FOR RECUSAL

TO _____, Specify PLAINTIFF or DEFENDANT.

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the MOVANT'S MOTION FOR A RECUSAL in the above-styled case. This Court has scheduled a hearing on the motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court) _____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20_____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20_____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

SEPARATE ACTIONS FOR TRIAL

WHEREAS the above-styled case pending before this Court involves a claim which for reasons of avoiding prejudice; expediting the resolution of claims in the action; or economical considerations neutral to the litigation, should be heard in a separate trial: (Specify)

IT IS HEREBY ORDERED:

That the claim specified above, pursuant to Rule 20 of the Rules of Justice Court, be tried separately in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

REQUEST FOR SERVICE BY PROCESS SERVER

I, the PLAINTIFF in the above-styled case, request service by a process server instead of the sheriff pursuant to Rule 14(g) of the Rules of Justice Court.

PLAINTIFF

Plaintiff's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If plaintiff is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**SUMMONS AND COMPLAINT
FOR CIVIL ACTION**

TO ANY LAWFUL OFFICER OF _____ COUNTY:

YOU ARE HEREBY COMMANDED:

TO SUMMONS: (Specify the name of the DEFENDANT and the address where summons is to be served)

TO APPEAR BEFORE THIS COURT on the ____ day of _____, 20____, at ____ o'clock ____ m. at:
(Specify the physical address of the justice court) _____

for a hearing on the civil complaint, as attached to this summons,

BY SERVING A COPY OF THIS SUMMONS AND ATTACHED COMPLAINT ON THE DEFENDANT
pursuant to Rule 14 of the Rules of Justice Court; and

TO PROMPTLY RETURN the served writ to the JUSTICE COURT CLERK OF THIS COURT.

Notice to Defendant

YOU ARE BEING SUED. IF YOU WISH TO CONTEST THIS SUIT IT IS MANDATORY THAT YOU BE
IN COURT ON THE DATE AND TIME YOU HAVE BEEN SUMMONED. YOU ARE TO BRING A
COPY OF THIS WRIT WHEN YOU APPEAR FOR THE HEARING. FAILURE TO APPEAR MAY
RESULT IN A DEFAULT JUDGMENT AGAINST YOU PURSUANT TO RULE 23 OF THE RULES OF
JUSTICE COURT.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

(Seal)

OFFICER'S RETURN:
STATE OF MISSISSIPPI, _____ COUNTY

I have served, or attempted to serve after diligent search and inquiry pursuant to section 25-7-27 of the Mississippi Code, the above summons and attached complaint in compliance with the terms and conditions commanded by the court, to wit:

- DATE THE SUMMONS AND COMPLAINT WERE SERVED ON THE DEFENDANT:
_____. Time of service (optional): _____ o'clock ____ m.

MANNER OF SERVICE:

- PERSONAL SERVICE pursuant to Rule 14(d)(1) of the Rules of Justice Court.
- SERVICE UPON A FAMILY MEMBER pursuant to Rule 14(d)(2) of the Rules of Justice Court.

Date of mailing a true copy of the summons and complaint, by first class mail, postage prepaid, to the defendant: _____.

- SERVICE BY POSTING pursuant to Rule 14(d)(3) of the Rules of Justice Court.

Date of mailing a true copy of the summons and complaint, by first class mail, postage prepaid, to the defendant: _____.

- ATTEMPTED SERVICE ON THE DEFENDANT AFTER DILIGENT SEARCH AND INQUIRY PURSUANT TO SECTION 25-7-27 OF THE MISSISSIPPI CODE, to wit:
(Specify) _____.

OFFICER AGENCY BADGE NUMBER DATE

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

**NOTICE OF RETURNED
SUMMONS AND COMPLAINT FOR CIVIL ACTION**

TO _____, PLAINTIFF
CURRENT MAILING ADDRESS

The summons to notify the defendant, _____, could not be served at the address: (Specify the address where service of summons was attempted) _____.

If you provide us with a new address, we will reissue the summons. There is an additional constable fee to have the summons reissued. Please contact this office should you have any questions concerning this matter.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20_____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

REQUEST FOR SUMMONS TO BE REISSUED

I hereby request that a new summons and attached complaint be issued on the DEFENDANT, at: (Specify the address for service of process)

_____.

I UNDERSTAND THAT THERE IS AN ADDITIONAL CONSTABLE FEE TO HAVE THE SUMMONS AND ATTACHED COMPLAINT REISSUED.

PLAINTIFF

Plaintiff's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If plaintiff is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

REQUEST FOR SUBPOENA FOR WITNESS

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

request this Court to issue a SUBPOENA for:

Name: _____.
Mailing address: _____.
Physical address, if different from mailing address: _____.
Email address: _____. Telephone: _____.

TO APPEAR AND GIVE TESTIMONY before this Court, and TO BRING TO THE HEARING the following books, papers, documents or other objects that are to be offered into evidence: (Specify)

_____.

Requesting Party

Date

Requesting party's information:

Name: _____.
Mailing address: _____.
Physical address, if different from mailing address: _____.
Email address: _____. Telephone: _____.

If requesting party is represented by counsel:

Attorney's name: _____.
Office mailing address: _____.
Office physical address, if different from mailing address: _____.
Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

SUBPOENA FOR WITNESS

**TO ANY OFFICER AUTHORIZED BY LAW
WITHIN THE STATE OF MISSISSIPPI TO SERVE SUBPOENAS:**

YOU ARE HEREBY COMMANDED:

TO SUMMONS, if to be found in your county: (Specify the name of the WITNESS and the address where summons is to be served) _____
to appear and give testimony before this Court on the ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court) _____
and to bring to the hearing the following books, papers, documents or other objects that are to be offered into evidence: (Specify) _____
BY PERSONALLY SERVING A COPY OF THIS SUBPOENA UPON THE WITNESS pursuant to Rule 21 of the Rules of Justice Court; and
TO PROMPTLY RETURN the served subpoena to this Court.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

(Seal)

**OFFICER'S RETURN:
STATE OF MISSISSIPPI, _____ COUNTY**

I have this day served the above subpoena in compliance with its terms and conditions.

DATE AND TIME THE SUBPOENA WAS PERSONALLY SERVED ON THE WITNESS:
_____ at _____ o'clock ____ m.

OFFICER AGENCY BADGE NUMBER DATE

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

AFFIDAVIT OF SUBSTANTIAL FINANCIAL HARDSHIP

I. GENERAL INFORMATION

Full name: _____ Date of birth: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Last four digits of SSN: _____ Driver's license number: _____.

Telephone number(s): _____ Email address: _____.

Number and ages of dependants: _____. Are you currently employed? Yes No

If yes, then provide the following information: Employer: _____.

Office address and telephone number: _____. Job title or description: _____.

II. MONTHLY NET INCOME

Net employment income (the amount you take home after taxes): \$ _____.

Retirement income: \$ _____.

Social security income: \$ _____.

Unemployment benefits: \$ _____.

Workers' compensation: \$ _____.

Other monthly income: \$ _____.

(Specify: _____.)

Total Monthly Net Income: \$ _____.

III. MONTHLY EXPENSES

Child support: \$ _____.

Alimony payments: \$ _____.

Rent or mortgage: \$ _____.

Utilities (e.g., gas, electricity, water, etc.): \$ _____.

Food: \$ _____.

Clothing: \$ _____.

Health care and medical expenses: \$ _____.

Vehicle payments or transportation expenses: \$ _____.

Minimum loan payments: \$ _____.

Minimum credit card payments: \$ _____.

Educational or employment expenses: \$ _____.

Legal financial obligations owed to the court or another court: \$ _____.

Other basic monthly living expenses: \$ _____.

(Specify: _____.)

Total Monthly Expenses: \$ _____.

IV. DISPOSABLE MONTHLY INCOME

(Total Monthly Net Income) minus (Total Monthly Expenses)
= Disposable Monthly Income

Disposable Monthly Income: \$ _____.

V. CASH AND VALUABLE ASSETS

Cash on hand and monies in a bank checking or savings account: \$ _____.

Stocks, bonds, and certificates of deposit: \$ _____.

Equity in real estate (value of property less what you owe): \$ _____.

Valuable personal property: \$ _____.

(Specify: _____.)

Other valuable assets that you own: \$ _____.

(Specify: _____.)

Total Cash and Valuable Assets: \$ _____.

VI. FINANCIAL PUBLIC ASSISTANCE

Check the box(es) for which you, or members of your household, receive financial public assistance:

- Aid to Families with Dependent Children (AFDC)
- Supplemental Nutrition Assistance Program (SNAP) (e.g., food stamps)
- Temporary Assistance for Needy Families (TANF)
- Supplemental Security Income (SSI)
- Social Security Disability Insurance (SSDI)
- VA Disability Compensation
- Medicaid
- Other: _____.

VII. ACKNOWLEDGMENT

My statements in this affidavit are true and accurate. I understand that any willful false statement contained herein may subject me to penalties of perjury under section 97-9-61 of the Mississippi Code. Further, I will inform the court if my income or financial status changes while this case is ongoing by personally reporting that information to the Clerk of this Court.

DEFENDANT

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

MOTION FOR SUBSTITUTION OF PARTY

- I, the PLAINTIFF in the above-styled case,
- I, the DEFENDANT in the above-styled case,

request this Court, pursuant to Rule 18 of the Rules of Justice Court, to substitute the following party in the above-styled case for the following reasons: (Specify) _____.

NOTICE OF THIS MOTION HAS BEEN SERVED ON THE OPPOSING PARTY,
AND IF REPRESENTED BY COUNSEL, THE OPPOSING PARTY'S ATTORNEY OF RECORD.

Movant

Movant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If movant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

ORDER ON MOTION FOR SUBSTITUTION OF PARTY

WHEREAS this Court having considered the MOVANT'S attached motion this day in open court,

IT IS HEREBY ORDERED:

- Granted. This Court, finding that the requested party substitution to be appropriate under Rule 18 of the Rules of Justice Court, orders that _____ be substituted as a party to this action, and that SERVICE OF PROCESS be made upon the substituted party pursuant to Rule 14 of the Rules of Justice Court. Trial is scheduled in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.
- Denied. This Court finds that the requested party substitution is not appropriate under Rule 18 of the Rules of Justice Court or otherwise by law. Trial is scheduled in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF MOTION FOR SUBSTITUTION OF PARTY

TO _____, Specify PLAINTIFF or DEFENDANT.

CURRENT MAILING ADDRESS: _____.

Please find attached a true copy of the MOVANT'S MOTION FOR SUBSTITUTION OF PARTY in the above-styled case. This Court has scheduled a hearing on the motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court) _____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

(Seal)

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

WAIVER BY PARTIES UPON REMITTAL OF DISQUALIFICATION

We, the PLAINTIFF and the DEFENDANT in the above-styled case, having been informed by _____, the JUSTICE COURT JUDGE assigned to hear our case, the basis of the judge's possible disqualification, as follows: (Specify) _____ such basis not being for bias or prejudice concerning a party, and having considered, out of the presence of the judge and upon advise of our respective lawyers, whether to waive the judge's disqualification, do hereby agree that the above-named judge should not be disqualified from hearing this case. A COPY OF THIS AGREEMENT SHALL BE RETAINED IN THE COURT FILE.

PLAINTIFF

DEFENDANT

Sworn to and subscribed before me this the ____ day of _____, 20____.

JUSTICE COURT CLERK / D.C.

Plaintiff's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If plaintiff is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

Defendant's information:

Name: _____.

Mailing address: _____.

Physical address, if different from mailing address: _____.

Email address: _____. Telephone: _____.

If defendant is represented by counsel:

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

MOTION FOR WITHDRAWAL OF COUNSEL

I, _____, the ATTORNEY representing:

- the PLAINTIFF in the above-styled case,
- the DEFENDANT in the above-styled case,

request permission of this Court, pursuant to Rule 19 of the Rules of Justice Court, to withdraw as counsel for reasons of good cause, as follows: (Specify) _____.

NOTICE OF THIS MOTION HAS BEEN SERVED ON MY CLIENT AND ALL PARTIES.

ATTORNEY

Attorney's name: _____.

Office mailing address: _____.

Office physical address, if different from mailing address: _____.

Office email address: _____. Office telephone number: _____.

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

ORDER ON MOTION FOR WITHDRAWAL OF COUNSEL

WHEREAS this Court having considered the ATTORNEY'S attached motion this day in open court,

IT IS HEREBY ORDERED:

- Granted. Trial is scheduled in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.
- Denied. This Court, in making every effort to assure that the final disposition of this case is free from unreasonable delay, finds that there is NOT GOOD CAUSE to allow the attorney to withdraw as counsel, as follows: (Specify) _____.
Trial is scheduled in this Court on the ____ day of _____, 20____, at ____ o'clock ____ m.

ORDERED AND ADJUDGED this the ____ day of _____, 20_____.

JUSTICE COURT JUDGE

IN THE JUSTICE COURT OF _____ COUNTY, STATE OF MISSISSIPPI

PLAINTIFF: _____ versus

DEFENDANT(S): _____.

Case # _____. Docket # _____. Page # _____.

NOTICE OF MOTION FOR WITHDRAWAL OF COUNSEL

TO _____, PLAINTIFF AND DEFENDANT.

CURRENT MAILING ADDRESS OF PLAINTIFF: _____.

CURRENT MAILING ADDRESS OF DEFENDANT: _____.

Please find attached a true copy of the ATTORNEY'S MOTION TO WITHDRAW in the above-styled case. This Court has scheduled a hearing on the motion for ____ day of _____, 20____, at ____ o'clock ____ m. at: (Specify the physical address of the justice court) _____.

YOU HAVE A RIGHT TO BE PRESENT FOR THIS HEARING. All responses to the motion must be filed with this Court by ____ day of _____, 20_____.

WITNESS MY HAND AND SEAL this the ____ day of _____, 20_____.

JUSTICE COURT CLERK / D.C.

(Seal