

**NONPAYMENT COMPLAINT**  
**California Association of Legal Support Professionals**

TO: CALSPro Dispute Resolution Committee  
Attn: \_\_\_\_\_, Chairman

I am placing before you a formal complaint against a CALSPro member for the nonpayment of a bill for services rendered by me. The member's name is as follows:

Name of Member: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Attached are the following:

- Copy of original invoice
- Copy of Request for Service or letter of instruction
- Copy of CALSPro form Notice of Pending Complaint (required)
- Copy of statement
- Copy of original demand for payment
- Statement of fact and/or other supporting documentation

I do hereby request that the Dispute Resolution Committee exercise the procedures and remedies in the Bylaws and Manual of Policies and Procedures for resolution of this matter. I certify that I am a member of CALSPro and that this claim is just and due and that I have made all good faith efforts to collect this debt.

Complainant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Complainant's Contact Information:

Name of Member: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_