(Rev. 1/23/2018)

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(REPLEVIN); SUMMONS	Form #3DC10			
IN THE DISTRICT COURT OF THE FIFTH CIRCUIT LIHUE DIVISION STATE OF HAWAI'I				
Plaintiff				
	Reserved for Court Use			
	Civil No.			
Defendant	Filing Party/Attorney Name, Attorney Number, Firm Name (if applicable), Address, and Telephone Number			
COMPLAINT FOR RETURN OF PERSONAL PROPERTY (REPLEVIN)				
1. This Court has jurisdiction over this matter and venue is proj	per.			
 □ Return of leased or rented personal property valued at \$. □ Replevin pursuant to the Uniform Commercial Code. Pleommercial contract and after reasonable effort has been reasonably indicate that the effort will be unavailing. (H. □ Replevin pursuant to the Uniform Commercial Code. Pleofer default. (Hawai'i Revised Statutes §490:9-609(b)) 	aintiff is the \square Buyer or \square Lessee of goods identified in a numble to effect cover for the goods or the circumstances awai'i Revised Statutes §§490:2-716(3) and 490:2A-521(c)) aintiff is the secured party and has the right to take possession			
3 Defendant holds the personal property described below again	nst the rights of Plaintiff.			
4. Before filing this action Plaintiff demanded that Defendant to refused and still refuses to turn over the personal property to				
5. Plaintiff asks for a Judgment and Writ of Replevin awarding alternative, for a Judgment in the amount of the property's va				
6. In addition, the Court may award costs, interest, and reasonal	ble attorney's fees, as allowed by statute. SEE PAGE 2			
	I certify that this is a full, true, and correct copy of the original on file in this office.			
᠖ RG-AC-508 (03/2024) WF	Clerk, District Court of the above Circuit, State of Hawai'i			

DESCRIPTION	PERSONAL PROPERTY SERIAL # OR OTHER ID MARK	VALUE	
TOTAL VALUE OF PROPERTY			
	Signature of Filing Party/Attorney:		
Date:	Print/Type Name:		
DECLARATION			
I DECLARE UNDER PENALTY OF LAW THAT WHAT IS STATED IN THE COMPLAINT IS TRUE AND CORRECT.			
	Signature of Declarant:		
Date:	Print/Type Name:		



In accordance with the Americans with Disabilities Act and other applicable state and federal laws, if you require an accommodation for a disability when working with a court program, service, or activity, please contact the District Court Administration Office at PHONE NO. 482-2347, FAX 482-2509, or TTY 482-2533 at least ten (10) working days before your proceeding, hearing, or appointment date.

For Civil related matters, please call 482-2303 DC Civil Division or visit the Self Help Center at 3970 Kā'ana Street, Lihu'e, Hawai'i 96766

IN THE DISTRICT COURT OF THE FIFTH CIRCUIT STATE OF HAWAI·I		
Plaintiff(s)		
	Reserved for Court Use	
	Civil No.	
Defendant(s)	Filing Party/Attorney Name, Attorney Number, Firm Name (if applicable), Address, and Telephone Number	
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SUMMONS

THE STATE OF HAWAI'1:

TO: The Director of Law Enforcement of the State of Hawai'i, the Director's deputy, or any police officer or other person authorized by the laws of the State of Hawai'i:

This Summons shall not be personally delivered between 10:00 p.m. and 6:00 a.m. on premises not open to the public, unless a Judge permits, in writing on this Summons, personal delivery during those hours.

TO THE DEFENDANT(S):

You are required to file a written answer or appear before the District Judge of this Court, in the Judge's Courtroom, on the day and at the time designated below. If the Defendant is a corporation or limited liability company, Hawai'i law requires it to be represented by an attorney licensed to practice in the State of Hawai'i.

IF YOU OR YOUR ATTORNEY FAIL TO ATTEND THE COURT HEARING AT THE TIME AND PLACE DESIGNATED BELOW OR FILE A WRITTEN ANSWER, A DEFAULT JUDGMENT WILL BE TAKEN AGAINST YOU FOR THE RELIEF DEMANDED IN THE COMPLAINT.

District Court Division - 3970 Ka'ana Street, Courtroom #2, Lihue, Hawai'i 96766 at 8:00 a.m. on the third Monday following date of service and should said Monday be a legal holiday then upon the next Monday.

Mailing Address for the court District Court Civil Division 3970 Ka'ana Street, Suite 207, Lihue, HI 96766

Date:	Clerk

Americans with Disabilities Act Notice



If you need an accommodation for a disability when participating in a court program, service or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation:

• Call (808) 482-2347, FAX (808) 482-2509; or send an email to <u>adarequest@courts.hawaii.gov</u>
The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.

For Civil related matters, please call (808) 482-2303 DC Civil Division or visit the Self Help Center at 3970 Kâ'ana Street, Suite 207, Lîhue, HI 96766

(Rev. 1/01/2024) Form#5DC50