

Nevada State Board of Massage Therapy

1755 E. Plumb Lane Suite 252 Reno, NV 89502 Phone (775) 687-9955 Fax (775) 786-4264

Email: nvmassagebd@lmt.nv.gov
Website: http://massagetherapy.nv.gov

PROCEDURES TO FOLLOW WHEN FILING A COMPLAINT

- 1) You are the Complainant/Consumer. You must state all the facts concerning the incident you are reporting. Use full names of people; give the complete address for the location of the incident, relevant dates and times. Please provide the full details of the incident. The person you are making this complaint against is the Respondent.
- 2) Please print or have the form typewritten. It is essential that we be able to read the complaint.
- 3) You may mail or fax the attached documents to the address above for processing.
- 4) You may call and speak with an investigator.
- 5) Once your complaint is completed, please send the complaint and all supporting evidence to the address listed above. Upon receipt, the complaint will be reviewed and assigned for investigation.

NOTE: The investigation can take up to ninety (90) days. After the investigation is completed, the entire file will be reviewed by the Board Attorney to determine if a hearing should be held. If a hearing is scheduled, you will be notified and may be called to testify before the Board.

Consumer Complaint

Complainant: Simon Miles
Complainant Address:
Preferred contact number:
Preferred contact email:
Respondent: Seanna Marie Cornelius
License #: NVMT2565
Date of Incident: 12/9/20
440 Alysheba Court, Reno, Nevada, 89521 Location of Incident:
Have you reported allegations to another state agency or local government entity? Y N f Yes, please provide name and contact information for agency or local government entity:
f Yes, please provide complaint or case number if any:
Statement:
As. Cornelius is conducting business in her home without a business license and without an active Massage
herapist license. I also paid her over \$11,000 for massage therapy that she never provided. By her own
admission, she charged \$1200 for 10-2 hour long massages. I received less than 15 in a one year period. I
believe she has committed fraud against me for the money paid. I either want the 75 missing massage sessions or
I want the \$9000 returned back to me. Since I have already been to court because she filed a TPO against me, I

likely will not want her to perform the massage work on me - I would rather have the money returned.	
I am attaching copies of every cashed check I wrote to her as proof that I paid for massage I never	
received. I am also attaching a copy of her current license which was suspended September, 2020.	
I did not find any current active business license with the City of Reno nor the County of Washoe. I	
believe she is operating a massage therapy business illegally from her home - address included.	
Use additional pages if necessary:	
Per Nevada Revised Statute (NRS) 53.045 – If executed in the State of Nevada: I declare under penalty of perjury that the foregoing is true and correct.	
Executed on 2/16/21(date)	
Signature: Simon Miles	





VERIFY LICENSE

License information on this site reflects information in the Nevade State Board of Massage Therapist database; however, applications and forms are subject to similarly processing time, and the information here does not reflect pending changes which are being reviewed.

Enter L cease Number or First Name or Lest Name to check on the I cease stellue of your massage thereptst. If you don't know the exact shall no of the name, type only the first few letters. You do not need to enter value in all fields to begin a search.

Last Name :

Cornelius

First Nerve :

.....

License Number: Massage Tr v

Ros

For a more detailed view of a licensee's Information, click that V ew Details button on the row for which you want datalled information. To clear the search end enter new search, click on the Resel button above.

SEA NNA M. CORNELIUS

NVMT.2665

E2 pired

RENO

NV

Name: SEANNA M. CORNELIUS

City: RENO

Blate: NV

ZIP: 89**6**08

Phone: (776) 233-8597

Licease #: NVMY.2565

Liceran Type: Massage Therapiet

Charrent License Status: Expired

Original Literan Date, 06/29/2007

Licenses Expiration Onles 09/30/2020

· Close delad

Exhibit page A

List of all Payments made to Seanna Cornelius by amount, date and check number. The last section is payments not made specifically for massage therapy.

Date	Amount	Check #
1/10/20	\$600	2935
1/17/20	\$600	2937
2/7/20	\$600	2941
2/14/20	\$500	2943
2/21/20	\$600	2944
3/13/20	\$600	2947
3/20/20	\$250	2952
4/3/20	\$600	2954
4/17/20	\$600	2955
5/1/20	\$600	2957
5/16/20	\$600	2959
5/28/20	\$300	2911
5/31/20	\$300	2913
6/5/20	\$600	2914
6/19/20	\$600	2915
8/26/20	\$400	102
9/9/20	\$400	105
9/12/20	\$600	106
10/6/20	\$100	109 - I don
the commen	t section hers	
10/19/20	\$600	111
10/23/20	\$600	112

The following checks had no comment about massage therapy and the money likely did not get used to pay for anything to do with massage therapy.

7/17/20 \$1200 2917

7/17/20	\$1200	2917
10/5/20	\$95	108
10/28/20	\$115	113
11/19/20	\$115	117
12/3/20	\$300	118
12/7/20	\$200	116
12/9/20	\$120	120