

Name of Person Filing Document: _____
Your Address: _____
Your Telephone Number: _____
Attorney Bar Number (if applicable): _____
Representing Self (Without Attorney) OR Attorney Petitioner Respondent

**IN THE SUPERIOR COURT OF ARIZONA
PINAL COUNTY**

(Name of Plaintiff)

Case No. _____

and

**CERTIFICATE OF
COMPULSORY ARBITRATION**

(Name of Defendant)

The undersigned certifies that the largest award sought by the complainant, including punitive damages, but excluding interest, attorneys' fee, and costs (does) (does not) exceed limits set by Local Rule for compulsory arbitration.

This case (is) (is not) subject to the Uniform Rules of Procedures for Arbitration.

Dated this _____ day of _____, _____.

Signature of Attorney / Plaintiff