Print Form Clear Form

Arbitrator:

_____
_____
_____
Phone:_____ Bar #:_____

SUPERIOR COURT OF ARIZONA
IN PIMA COUNTY

Plaintiff,	)	C_____
vs.	)	NOTICE OF ARBITRATION HEARING
Defendant,	)	
_____	)	

The arbitration hearing in this matter is set for the_____day of _____ , 20 ___ , at _____ o'clock (a.m./p.m.). The hearing is to be held at the above address.

Dated this _____day of _____ , 20 ___ .

_____
Arbitrator

Copies mailed this_____day
of _____ , 20 ___ , to:

1. Plaintiff(s)
2. Defendant(s)
3. Superior Court Arbitration Desk