|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Person Filing: | |  | | | | |  |
| Address (if not protected): | | | | | |  |  |
| City, State, Zip Code: | | | |  | | |  |
| Telephone: |  | | | | | |  |
| Email Address: | |  | | | | |  |
| ATLAS Number: | | |  | | | |  |
| Lawyer’s Bar Number: | | | | |  | |  |
|  | | | | | | | |

**ARIZONA SUPERIOR COURT, PIMA COUNTY**

|  |
| --- |
|  |
| Plaintiff |
| v. |
|  |
| Defendant |

|  |
| --- |
| Case No. |

**RULE 102(b) FASTAR**

**CONTROVERTING CERTIFICATE  
ALTERNATIVE RESOLUTION**

|  |  |
| --- | --- |
| ASSIGNED TO: |  |

The undersigned certifies that he or she has read and understands the Rules Applicable to the Fast Trial and Alternative Resolution Program (“FASTAR”), and hereby **CONTROVERTS** the Plaintiff(s)’ Rule 102(a) FASTAR Certificate for the following reasons: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE

**CERTIFICATE OF SERVICE**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Copy of the foregoing mailed this date | | | | |  | | to: |
|  | | | | |  | |  |
| Name: | |  | | | |  | |
|  | |  | | | |  | |
| Address: | | |  | | |  | |
|  | | |  | | |  | |
| City, State, Zip: | | | |  | |  | |
|  | | | |  | |  | |
| ☐ Plaintiff ☐ Defendant  ☐ Attorney for Plaintiff  ☐ Attorney for Defendant | | | | | | | |
|  | | | | | | | |
| By: |  | | | | |  | |
|  | (Signed Name) | | | | |  | |