

SACRAMENTO COUNTY BAR ASSOCIATION
Client's Request to Arbitrate

1. Client Information

Last Name:	First Name	Daytime Phone
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Street Address:	City/State	Zip Code
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1. Attorney Information

Last Name:	First Name	Daytime Phone
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Street Address:	City/State	Zip
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2. I hired the above attorney for _____ case.
(Example: Family Law, Real Estate, Probate, Criminal, etc.)

4. I signed a fee agreement: () YES..... please enclose a copy if available. () NO

5. I was served the "Notice of Client's Right to Arbitration": () YES....please enclose copy if available. () NO

6. I was served a summons for collection: () YES..... () NO

7. I have answered the summons: () YES..... () NO

8. I have filed a suit against my attorney: () YES..... () NO

9. My bill to date: \$ _____
(can include both paid & unpaid)

10. I feel my attorney earned this amount: \$ _____

11. The amount I wish to dispute:
(subtract line 10 from line 9) \$ _____

12. Filing Fee: The filing fee is 5% of the disputed amount. The minimum amount that can be disputed is \$500. All filing fees are nonrefundable unless otherwise noted in the SCBA Mandatory Fee Arbitration "Rules of Procedure." However, you may request the filing fee be made part of the award and your attorney be directed to refund you the amount. Please note: ***THE FILING FEE IS DUE AT THE TIME OF FILING YOUR CLAIM.***

13. My filing fee comes to \$_____ and is enclosed.

14. Please include my filing fee as part of the award: () YES..... () NO

15. Give brief description of your dispute: (use additional sheets or the back of this form)

16. I was referred to my attorney through a referral from the "Lawyer Referral & Information Service of the Sacramento County Bar Association: () YES.... () NO

17. I choose *one* arbitrator: () or I choose *three* arbitrators: ()

18. I want an arbitrator with a background in *Criminal*: ()

I want an arbitrator with a background in *Civil*: ()

19. I want an "advisory"(non-binding) award: ()

I want a "binding" award: ()

Note: Any questions regarding this form please refer to the Sacramento County Bar Association Mandatory Fee Arbitration "Rules of Procedure" or contact the Administrator at (916) 564-3780 ext. 206.

Signature _____

Date _____

Please return completed form, supporting documents & filing fee to the following address:

**Sacramento County Bar Association
Mandatory Fee Arbitration
1329 Howe Ave., Ste. 100
Sacramento, California 95825**

rev 07/09