

1 [Firm Name]
[Firm Address]
2 [Firm Phone Number]
[Firm Fax]
3 [Firm Email]
[Attorney Name and Bar Number]
4 *Attorney for [Plaintiff]*

5 Arizona Superior Court, Maricopa County

6 Case No.
7 **Plaintiff's Certificate Regarding**
8 **Compulsory Arbitration**

9
10 The undersigned certifies that he or she knows the dollar limits and any other
11 limitation set forth by the local rules of practice for the applicable superior court and
12 further certifies that this action **[is/is not]** subject to compulsory arbitration, as provided in
13 Rules 72 through 77 of the Arizona Rules of Civil Procedure.

14 Dated [Date]

15 [Firm Name]
16
17 By /s/ [Attorney Name] _____
[Attorney Name]
18 [Attorney Address]
Attorneys for [Plaintiff Name]