

<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</b> STREET ADDRESS: 191 North First Street MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, CA 95113 BRANCH NAME: Downtown Courthouse – Civil Division	<i>FOR COURT USE ONLY</i>
PLAINTIFF:	
DEFENDANT:	
<b>AWARD OF ARBITRATOR</b>	CASE NUMBER:

Name of Arbitrator: \_\_\_\_\_

The undersigned, designated Attorney Arbitrator, having heard the case on *(date)* \_\_\_\_\_, makes the following award:

Plaintiff(s) \_\_\_\_\_  
 Shall recover from the defendant(s) \_\_\_\_\_  
 \_\_\_\_\_ the sum of \$ \_\_\_\_\_.

The claim(s) of plaintiff(s) \_\_\_\_\_  
 \_\_\_\_\_ is/are denied as to defendant(s) \_\_\_\_\_.

Cross-Complainant(s) \_\_\_\_\_  
 shall recover from cross-defendant(s) \_\_\_\_\_  
 \_\_\_\_\_ the sum of \$ \_\_\_\_\_.

The claim(s) of cross-complainant(s) \_\_\_\_\_  
 \_\_\_\_\_ is/are denied as to cross-defendant(s) \_\_\_\_\_.

Statutory costs are awarded to \_\_\_\_\_

Other: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
 Arbitrator's Signature

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PLAINTIFF:	CASE NUMBER:
DEFENDANT:	
<b>PROOF OF SERVICE PERSONAL SERVICE - FIRST CLASS MAIL</b>	

I served a signed copy of the award of arbitration on the following persons:

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Date of Service: \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_ at \_\_\_\_\_

Arbitrator: \_\_\_\_\_