

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number, and Address) State Bar No.</p> <p>TELEPHONE NO. _____ FAX NO. (OPTIONAL) _____ EMAIL ADDRESS _____ (Optional)</p>	<p>FOR COURT USE ONLY</p>
<p><b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SACRAMENTO</b>  STREET ADDRESS: 720 9<sup>th</sup> Street, Room 102  MAILING ADDRESS: 720 9<sup>th</sup> Street, Room 102  CITY AND ZIP CODE: Sacramento, CA 95814  BRANCH NAME: Gordon D. Schaber</p>	
<p><b>PLAINTIFF:</b></p> <p><b>DEFENDANT:</b></p>	<p>CASE NUMBER:</p>
<p align="center"><b>REJECTION OF ARBITRATION AWARD AND REQUEST FOR TRIAL DE NOVO</b></p>	

NOTICE IS HEREBY GIVEN that parties listed below reject the Award of Arbitrator, dated \_\_\_\_\_, and hereby request Trail de Novo in the Superior Court of California, County of Sacramento pursuant to 1141.20 of the Code of Civil Procedure and rule 3.826 of the California Rules of Court.

- Plaintiff(s)
- Defendant(s)
- Other \_\_\_\_\_  
(Specify)

List all parties you represent that reject the Arbitration Award and request a Trial de Novo:

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

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature of attorney or party without attorney

PLAINTIFF:  DEFENDANT:	CASE NUMBER:
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**PROOF OF SERVICE**

I served the Request for Trial de Novo by depositing a copy thereof (endorsed in a sealed envelope, postage prepaid) in the United States mail, addressed to each party or their attorney on \_\_\_\_\_ at \_\_\_\_\_, California.

At the time of service I was at least 18 years of age, a United States citizen employed/residing in the county where the mailing occurred, and not a party to the action. My residence/business address is:

\_\_\_\_\_  
I declare under penalty of perjury that the foregoing is true and correct and this declaration was executed on \_\_\_\_\_ at \_\_\_\_\_.

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Declarant