

ARBITRATION STATISTICAL SUMMARY

Style of Case _____

Case Number _____

Judge _____ Circuit County

Date of Arbitration _____

Number of Hearing(s) _____

Hours _____

Total Charges _____

Type of Case (Primary basis for lawsuit)

- Consumer
- Contract
- Eminent Domain
- Employment
- Malpractice
- PIP
- Personal Injury
- Products Liability
- Property Damage
- Real Property/Mortgage Foreclosure
- Other (please indicate)_____

A party to the arbitration filed a motion seeking a trial de novo after no later than twenty (20) days after the final decision was served? Yes No

Signature of Arbitrator _____

Printed Name of Arbitrator _____

Date _____

RETURN TO:

Court Mediation and Arbitration Program, Room 19150, Broward County Courthouse,
201 S. E. 6th Street, Ft. Lauderdale, Florida 33301
Tel: (954) 831-6313 Fax: (954) 831-6079