



## SUPERIOR COURT

**REJECTION OF ARBITRATOR'S AWARD  
FOR CASES CERTIFIED TO ARBITRATION BEFORE JANUARY 1, 2014**

Providence/Bristol County    Kent County    Washington County    Newport County

<b>Plaintiff</b>	<b>Civil Action File Number</b>
<b>Defendant</b>	

\_\_\_\_\_ (Name of the  Plaintiff  Defendant) in the above-entitled case rejects the Arbitrator's Award which was filed on \_\_\_\_\_ (date).

**REGISTERED USERS SHALL ELECTRONICALLY FILE THIS REJECTION AND THE REQUIRED \$200 REJECTION FEE WITHIN TWENTY (20) DAYS OF THE FILING OF THE AWARD WITH COPIES CERTIFIED TO OPPOSING COUNSEL. ALL OTHERS MUST MAIL THIS THIS REJECTION AND THE REQUIRED \$200 REJECTION FEE WITHIN TWENTY (20) DAYS OF THE FILING OF THE AWARD WITH COPIES CERTIFIED TO OPPOSING COUNSEL TO THE ARBITRATION OFFICE AT THE LICHT JUDICIAL COMPLEX, 250 BENEFIT STREET, ROOM 531, PROVIDENCE, RI 02903.**

/s/ _____ Attorney for the <input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant or <input type="checkbox"/> Self-represented litigant	Rhode Island Bar Number
	Date
Telephone Number: _____	

**CERTIFICATE OF SERVICE**

I hereby certify that, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_:

I filed and served this document through the electronic filing system on the following:

\_\_\_\_\_  
The document electronically filed and served is available for viewing and/or downloading from the Rhode Island Judiciary's Electronic Filing System.

I served this document through the electronic filing system on the following:

\_\_\_\_\_  
The document electronically served is available for viewing and/or downloading from the Rhode Island Judiciary's Electronic Filing System.

I mailed or  hand-delivered this document to the attorney for the opposing party and/or the opposing party if self-represented, whose name is \_\_\_\_\_ at the following address

/s/ \_\_\_\_\_  
Name