



Lara P. Deguzman  
 ARBITRATION ADMINISTRATOR

**NOTICE OF HEARING**

**DATE:** \_\_\_\_\_

**TO:** Court Annexed Arbitration Program

**FROM:** \_\_\_\_\_  
 Arbitrator

**SUBJECT:** Civil No.: \_\_\_\_\_ Arb. No.: \_\_\_\_\_  
 \_\_\_\_\_ vs. \_\_\_\_\_

The Hearing for the above case has been scheduled as follows:

**DATE:** \_\_\_\_\_

**TIME:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PRE-HEARING STATEMENTS DUE BY:** \_\_\_\_\_

cc: Plaintiff's Attorney: \_\_\_\_\_

Defendant's Attorney: \_\_\_\_\_



In accordance with the Americans with Disabilities Act and other applicable state and federal laws, if you require a reasonable accommodation for your disability, please contact the Court Annexed Arbitration Office at PHONE NO. 808-534-6000, FAX 808-534-6011, or TTY 808-539-4853 at least ten (10) working days in advance of your pre-hearing or hearing date. The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.