|  |  |  |
| --- | --- | --- |
| Person Filing:  |  |  |
| Address (if not protected): |  |  |
| City, State, Zip Code:  |  |  |
| Telephone:  |  |  |
| Email Address:  |  |  |
| ATLAS Number:  |  |  |
| Lawyer’s Bar Number: |  |  |
|  |

**ARIZONA SUPERIOR COURT, PIMA COUNTY**

|  |
| --- |
|  |
| Plaintiff |
| v. |
|  |
| Defendant |

|  |
| --- |
| Case No.                                |

**RULE 102(a) FASTAR CERTIFICATE**

|  |  |
| --- | --- |
| ASSIGNED TO: |  |

The undersigned certifies that he or she knows the eligibility criteria set by FASTAR Rule 101(b) and certifies that this case:

**(NOTE – YOU MUST CHECK ONE OF THE BOXES BELOW OR THE CLERK WILL NOT ACCEPT THIS FORM.)**

 **DOES** meet the eligibility criteria established by Rule 101(b); or

 **DOES NOT** meet the eligibility criteria established by Rule 101(b).

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 SIGNATURE

**CERTIFICATE OF SERVICE**

|  |  |  |
| --- | --- | --- |
| Copy of the foregoing mailed this date |  |  to: |
|  |  |  |
| Name: |  |  |
|  |  |  |
| Address: |  |  |
|  |  |  |
| City, State, Zip: |  |  |
|  |  |  |
| ☐ Plaintiff ☐ Defendant☐ Attorney for Plaintiff☐ Attorney for Defendant |
|  |
| By: |  |  |
|  | (Signed Name) |  |