

Fill in the registry file

Notice to Mediate for Claims up to \$10,000 In the Provincial Court of British Columbia

(Small Claims Court)

IN THE CASE BETWEEN

number and location as					CLAIMANT(S)	Ζ
shown on the Notice of Claim.	NAME					0
	ADDRESS					Ĕ
						Ce
	CITY, TOWN, MUNICIPALITY	PROV.	POSTAL CODE	TEL. #		
	AND					ö
					DEFENDANT(S)	\leq
	NAME					Φ
	ADDRESS					0
						<u>a</u>
	CITY, TOWN, MUNICIPALITY	PROV.	POSTAL CODE	TEL. #		late
	AND					-
				DEFEI	NDANT / THIRD PARTY	Q
	NAME					_
	ADDRESS					
	CITY, TOWN, MUNICIPALITY	PROV.	POSTAL CODE	TEL. #		laims
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	To: The Provincial Court (Smal	I Claims) Begistry				ð
	To: The Provincial Court (Small	rolainis) negistry				S
	TAKE NOTICE THAT the					
	☐ Claimant					0,000
	Defendant					0
	Third Party					0
	wishes this claim to be medi	ated in accordance with Rule 7.2				1
						1

For information on mediation, contact the Court Mediation Program at (604) 684-1300 or toll free at 1-877-656-1300

Today's date

Dated _

signature of person filing the Notice to Mediate for Claims up to \$10,000

Print name _

1-COURT 2-APPLICANT 3-COURT MEDIATION PROGRAM