UCS 1	37-5a (8/02)	(Office Use Only)
In the Matter of Fee Dispute Arbitration between		Case Number:
	, Client and	ATTORNEY RESPONSE TO REQUEST FOR FEE ARBITRATION
	, Attorney	
attorn along	ney response and return it to the local program with a certification that you have served	TIONS on" by the above Client. Please complete this m listed below within 15 days of this mailing I the Client with the attorney response and
indica 1.	Name, address, telephone number:	
2.	Set forth in narrative fashion your response to the request for fee arbitration, indicating those items in the request with which you disagree and providing a brief explanation or why you believe you are entitled to the amount of the fee that is in dispute (use additional pages if necessary):	
2	□ Lagrage to attempt to regular this fee disp	pute first through mediation [applicable only if
3.	client so indicates in item 10 of the request]	
Dated	i :	Signed:
		Local Program Address