

**PROCEDURES FOR BINDING ARBITRATION**

YOU MAY SELECT AN ARBITRATOR FROM THE ATTACHED LIST  
OR ONE WILL BE CHOSEN FOR YOU.

YOU WILL BE NOTIFIED BY MAIL  
OF THE TIME AND PLACE OF YOUR ARBITRATION HEARING.

IF MORE THAN ONE OF YOUR CLAIMS ARE REJECTED  
ALL OF THOSE CLAIMS WILL BE ARBITRATED AT THE SAME HEARING.

YOU WILL NOT BE CHARGED ANY COSTS OR FEES  
IN CONNECTION WITH THIS BINDING ARBITRATION.

THE DECISION OF THE ARBITRATOR SHALL BE A FINAL DETERMINATION  
OF YOUR CLAIM(S), AND YOUR RIGHT TO APPEAL FROM THE  
ARBITRATOR'S DECISION IS EXPRESSLY WAIVED BY YOU.

YOU MAY SUBMIT ANY DOCUMENTS OR TESTIMONY  
TO SUPPORT YOUR CLAIM AT THE ARBITRATION HEARING

IN ORDER TO HAVE YOUR CLAIM(S) ARBITRATED, YOU MUST  
COMPLETE, SIGN AND MAIL THIS FORM.

**THE FORM MUST BE POSTMARKED NOT LATER THAN NOVEMBER 5, 2001.**

I AGREE TO HAVE MY CLAIM(S) HEARD BY AN ARBITRATOR UNDER THE ABOVE  
PROCEDURES FOR BINDING ARBITRATION AND EXPRESSLY WAIVE ANY RIGHT OF APPEAL  
OF ANY DECISION RENDERED IN SUCH ARBITRATION.

YOUR CLAIM NUMBER(S)

DATE:

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

MY CHOICES FOR THE ARBITRATOR ARE THE FOLLOWING:

1<sup>ST</sup> CHOICE \_\_\_\_\_

2<sup>ND</sup> CHOICE \_\_\_\_\_

3<sup>RD</sup> CHOICE \_\_\_\_\_

OR CHOOSE ONE FOR ME \_\_\_\_\_

(SIGNATURE)

PLEASE MAIL YOUR COMPLETED AGREEMENT TO

Paradise Memorial Park Litigation  
2801 Ocean Park Boulevard, #10  
Santa Monica, California 90405

ALL ARBITRATION DECISIONS WILL BE MAILED  
NO LATER THAN JANUARY 21, 2002