

**FEE ARBITRATION PROGRAM
STATE BAR OF CALIFORNIA**

Waiver of Personal Appearance

Client Name

Attorney Name

I, _____, am the client attorney in this matter. I will be unable to attend the hearing and, under Rules 26.1 of the Rules of Procedure for Fee Arbitrations and the Enforcement of Awards by the State Bar of California, I waive my personal appearance.

My written testimony and/or exhibits are:

- attached to this document
- included with the Client's Request for Arbitration
- included with the Attorney's Reply

In addition, under Rule 26.2, I designate do not designate a representative to attend the hearing for me. That person's name, address and telephone number are:

Name

Address

City, State, Zip Code

Telephone Number

I declare under penalty of perjury under the laws of the State of California that my statements on this request and any attachments are true and correct.

Signature

Date