Portland Metropolitan Association of Realtors® 150 SW Harrison, Ste. 200, Portland OR 97201 Phone: 503-459-2156 Fax: 503 228-4170 sschneider@pmar.org



Realtor® Request for Mediation

In the matter of	Complainant	VS	Respondent	
				and ask that the Respondent
be contacted to participate in mediation. The disputed a			d amount is \$	*. My claim is
predicated upon th	e statement subm	itted with this re	quest.	
COMPLAINANT:				
Signature of Principa	al Broker	(date))	
Name (Type or Print	i)			
Street Address				
City	State	Zip Code		
Phone: ()_				
RESPONDENT:				
Name of Principal B	roker (Type or Print)			
Street Address				
City	State	Zip Code		

Phone: (_____)____

^{*} Disputed amount shall be a minimum of \$1,000.