DEMAND FOR ARBITRATION

Please provide the following information Party"), as submitted by you or the org Responding Party, the "Parties"):	on in connection with your dispute with Best Rate Holdings, LLC ("Responding anization that you represent ("Initiating Party" and together with the
Name of the Initiating Party: Address of the Initiating Party:	
Telephone Number of Initiating Party: E-mail Address of Initiating Party:	
Name of Responding Party:	Best Rate Referrals 28100 US Highway 19N, Suite 204 Clearwater, Florida 33761
Telephone Number of Responding Party E-mail Address of Responding Party:	notices@bestratereferrals.com
	o Best Rate Holdings, LLC Website Terms and Conditions ("Terms"). The Terms clause for the resolution of disputes, a copy of which is attached hereto as to the following issue(s):
Responding Party submit to arbitration	esolution of the subject dispute, the Initiating Party hereby demands that the pursuant to the rules and procedures set forth by either the American ludicial Arbitration and Mediation Services, Inc. ("JAMS"), as selected by the
The Initiating Party is claiming the follo	owing damages:
Total Damages Claimed \$	
In filing this Demand for Arbitration ("D	Demand"), the Initiating Party certifies the following:
He/she/it has provided the Responding receipt requested.	Party with a copy of this Demand by both e-mail and by certified mail, return
So demanded and certified, this da	y of, 20
Initiating Party	
Sworn to and subscribed before me, thi	s day of, 20
Notary Public	

(PLEASE NOTE: Notarization is required for original and mailed copies only. Notarization is not required to file or serve this Demand via e-mail)