

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  TELEPHONE NO. (Optional): _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR <b>Self-represented</b>	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF NAPA</b> STREET ADDRESS 825 Brown Street MAILING ADDRESS _____ CITY AND ZIP CODE: Napa, CA 94559	
PETITIONER:  RESPONDENT:	
<b>STIPULATION FOR RE-MEDIATION</b>	CASE NUMBER:

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The parties hereby stipulate to the following:

1. This case was last referred to Family Court Services for mediation within 1 year of the date of this request on: \_\_\_\_\_
2. Both parties seek re-mediation of their dispute through Family Court Services.
3. Both parties understand that re-mediation is completely voluntary.
4. If no agreement is reached upon conclusion of re-mediation, both parties understand that a new Request for Order must be filed and served on the other party to bring the matter before the court.
5. Re-mediation is requested to address:

as contained in the attached statement.

Dated: \_\_\_\_\_

Attorney for  Petitioner  Respondent

Dated: \_\_\_\_\_

Attorney for  Petitioner  Respondent