ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address)	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	To keep other people from seeing what you entered on your form, please press the Clear This Form button at the end of the form when finished.
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SONOMA	
3055 CLEVELAND AVE SANTA ROSA, CALIFORNIA 95403-2122	
PLAINTIFF/PETITIONER:	
DEFENDANT/RESPONDENT:	
STIPULATION AND ORDER REFERRING MATTER TO ALTERNATIVE DISPUTE RESOLUTION	CASE NUMBER:
(Check one): G UNLIMITED CASE G LIMITED CASE (Amount demanded (Amount demanded is	Date: Time:
exceeds \$25,000)	Location:
	Assigned Judge:
The parties hereby stipulate to refer the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Process: Image: Construct of the case to the following Alternate Dispute Resolution Image: Construct of the case to the case to the following Alternate Dispute Resolution Image: Construct of the case to the case	
Provider's Address:	
Provider's Telephone: Fax: E-mail address: No agreement The ADR process will be conducted on (date):	
G No agreement	
 The parties have reached agreement as to the payment of fees of ADR provider. The parties have not reached agreement as to the payment of fees of ADR provider. 	
	d Sign) Attorney or party without
 Plaintiff/Petitioner Defendant/Respondent/Contestant Type or print name of Party without attorney Attorney for Plaintiff/Petitioner Defendant/Respondent/Contestant (Date and Sign) Attorney or party without attorney without attorney (Sign in blue ink) 	
G Additional signatures are attached	(-)

<u>ORDER</u>

A REVIEW HEARING IS SCHEDULED AS FOLLOWS:

Date

Time

All parties must appear at the Review Hearing. In the event that the case is settled and a dismissal, a notice of settlement or a judgment is filed at least 3 court days befor e the scheduled Review Hearing, the Review Hearing will be dr opped and no one should appear. You must check the phone messa ge at _______ or go to http://sonoma.courts.ca.gov/online-services/tentative-rulings where the tentative dispositions will be posted the day before you are scheduled to come to court to determine if you must appear.

THE FIRST ATTORNEY OR PARTY LISTED MUST FILE PROOF OF SERVICE OF A COPY OF THIS ORDER ON ALL PARTIES.

Date

JUDGE OF THE SUPERIOR COURT