Name of Petitioner:		
Mailing Address:		
City, State, Zip Code:		
Phone Number:		
Email Address:		
Lawyer's Bar Number:		
Representing: ☐ Self ☐ Petitioner ☐ Respond	lent	For Clerk's Use Only
Name of Respondent:		
Mailing Address:		
City, State, Zip Code:		
Phone Number:		
Email Address:		
Lawyer's Bar Number:		
Representing: ☐ Self ☐ Petitioner ☐ Respond		
	COURT OF ARIZONA PAI COUNTY	
Name of Petitioner	Case No1300DO	
Tamo of Foliation	STIPULATED PETITION	ON FOR MEDIATION
Name of Respondent	☐ Pre-Decree ☐ Po	ost Decree
name or resoongen		

IMPORTANT - PLEASE READ

You may not request mediation to resolve the following issues:

- Child Support
- Enforcement of current court orders
- Cases in which there are allegations of child abuse or DCS involvement
- Modification of legal decision-making (custody) order earlier than one year after the date of the previous order.

*** If you file this Petition in error, the filing fee will NOT be refunded to you. ***

We **do not** agree about legal decision-making (custody) and/or parenting time issues involving our child(ren). We **DO AGREE** to try mediation to resolve our disagreement. **We** are asking Alternative Dispute Resolution Services (ADRS) to set a mediation of the issues, based on the following:

1.	There is a pending Petition for (choose one option – skip if there is no pending petition	n):
	 Dissolution of Marriage (Divorce), Legal Separation, or Annulment OR Petition for Establishment of Legal Decision-Making, Parenting Time (with or with a request to establish Paternity) OR Petition for Modification of Legal Decision-Making, Parenting Time, or Relocation On the Control of the Contr	OR
	☐ Other (write in name of petition file	∌d)
2.	Have you already participated in mediation?	
	☐ Yes, we have participated in mediation before OR☐ No, we have not already participated in mediation.	
3.	We disagree about the following things. NOTE: the disagreement must involve the leadecision-making (custody) and/or parenting time of your minor child(ren). (Be brief a specific – attach an additional sheet if needed.):	_
	We are filing this Stipulated Petition for Mediation together and agree that formal service process is waived. /e declare that everything we have said in this request is true and correct.	of
 Da	ate Signature of □ Attorney for □ Petitioner □ Responde	ent
 Da	ate Signature of □ Attorney for □ Petitioner □ Responde	ent
lf y	NOTICE TO BOTH PARTIES your order is signed by the Judicial Officer, Alternative Dispute Resolution Services will ma	ail
	n "Order to Appear Mediation" to both parties.	
	VARNING: FAILURE TO ATTEND CARRIES A \$200.00 REIMBURSEMENT COST FOR THE MISSED MEDIATION SESSION.	

Case No. <u>1300DO</u>