

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
ATLAS Number: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_

FOR CLERK'S USE ONLY

Representing  Self, without a Lawyer or  Attorney for  Petitioner OR  Respondent

## SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

\_\_\_\_\_  
Name of Petitioner,

and

\_\_\_\_\_  
Name of Respondent

Case Number: \_\_\_\_\_

ATLAS Number: \_\_\_\_\_  
(if applicable)

### ORDER FOR REFERRAL TO MEDIATION

Based on the ***“Request for Pre-Decree Mediation”*** and pursuant to Arizona Law,

**IT IS ORDERED** referring this matter to Conciliation Services. It is further ordered that the parties participate in Mediation.

The parties will be notified of the Mediation date and time through a separate minute entry.

**IT IS FURTHER ORDERED** that a copy of this ***“Order for Referral to Mediation”*** and a copy of the ***“Request for Pre-Decree Mediation”*** shall be mailed immediately to parties who have appeared in this action.

DONE IN OPEN COURT: \_\_\_\_\_  
Judge/Commissioner of the Superior Court

**READ ME:** If your order for referral to Mediation is signed by a Judicial Officer, Conciliation Services will mail an “Order to Attend Mediation” to both parties.

**WARNING!**  
**THERE MAY BE A \$200 FEE FOR  
FAILURE TO ATTEND THE MEDIATION!**

Additionally, the Court may make such orders as it feels are just,  
including granting the relief requested by the party who does appear.