ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional): E MAIL ADDRESS (Optional):	
E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	NE IMPERIAL
939 W. Main Street	AND WAIVERS FOLLOWING MEDIATION; ORDER THEREON Ion on (date), the parties were able to reach a full agreement on contested issues, contained in the attached Mediation Agreement dated, Is sipulate as follows: Iy with the terms set forth in the attached Mediation Agreement. Mediator:, Weldiator:, Weldiator:
El Centro, CA 92243	
PETITIONER:	
RESPONDENT:	
OTHER PARENT: STIPLIA TION AND WALVERS FOLLOWING M	IFDIATION CASE NUMBER:
ORDER THEREON	
After attending mediation on (date), the	parties were able to reach a full agreement on contested
custody and visitation issues, contained in the attached Me	diation Agreement dated
The parties declare and stipulate as follows:	
1. We agree to comply with the terms set forth in the atta	ched Mediation Agreement.
Date: Mediator:	
2. Each of us has knowledge of the hearing currently scho	eduled in this matter and waive our right to proceed with that
	• •
·	•
	c, commencing with section 5400) as Camorina is the
child(ren)'s home state.	
•	
6. We acknowledge being advised that a violation of our	custody/visitation agreement and this court order may subje
us to civil or criminal penalties, or both.	
Date:	
D.	Signature of Petitioner
Date:	Signature of Respondent
Date:	
	Signature of Other Parent/Claimant
Order to Show Cause/Notice of Motion hearing scheduled	on
at a.m. p.m. in Dept is:	
$\hfill \square$ VACATED. Custody and visitation are the only issues	and have been
resolved.	
☐ REMAINS ON CALENDAR. There are additional issu	es to be resolved
Based upon the agreement of the parties, the Court adopts	Mediation
Agreement.	
Date:	
<u></u>	Judge of the Superior Court