

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name, State Bar number, and address</i> ):  TELEPHONE NO.: _____ FAX NO. ( <i>Optional</i> ): _____ E-MAIL ADDRESS ( <i>Optional</i> ): _____ ATTORNEY FOR ( <i>Name</i> ): _____	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF IMPERIAL</b> <b>939 W. Main Street</b> <b>El Centro, CA 92243</b>	
PETITIONER: _____ RESPONDENT: _____	
<b>STIPULATION TO USE OF ALTERNATIVE DISPUTE          RESOLUTION PROCESS (California Rules of Court 3.221)</b>	CASE NUMBER: _____

The parties and/or their attorneys stipulate that the matter is at issue and that this action shall be submitted to the following alternative dispute resolution process. Selection of any of these options will not delay any case management timelines.

- \_\_\_\_\_ Court Ordered Non-Binding Arbitration (Cases valued at \$50,000 or less)
- \_\_\_\_\_ Private Mediation
- \_\_\_\_\_ Private Binding Arbitration
- \_\_\_\_\_ Other (specify): \_\_\_\_\_

It is also stipulated that the following shall serve as arbitrator, mediator or other neutral:

\_\_\_\_\_.

Date: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Name of Plaintiff/Petitioner

\_\_\_\_\_  
Name of Defendant/Respondent

\_\_\_\_\_  
Signature of Plaintiff/Petitioner

\_\_\_\_\_  
Signature of Defendant/Respondent

\_\_\_\_\_  
Name of Plaintiff's Attorney

\_\_\_\_\_  
Name of Defendant's Attorney

\_\_\_\_\_  
Signature of Attorney

\_\_\_\_\_  
Signature of Attorney