Person Filing:	
Address (if not protected):	
City, State, Zip Code:	
Telephone:	
Email Address:	
ATLAS Number:	FOR CLERK'S USE ONLY
Lawyer's Bar Number:	
Representing Self, without a Lawyer OR	Attorney for Petitioner OR Respondent
	OURT OF ARIZONA COPA COUNTY
	Case Number:
Name of Petitioner / Party A	
	ORDER FOR REFERRAL TO MEDIATION
Name of Respondent / Party B	
Based on the Request for Pre-Decree Mediati  IT IS ORDERED referring this matter ordered that the parties participate in Mediation of the Request for Pre-Decree Mediation in	ter to the Family Department. It is further
The parties will be notified of the Mediation	date and time through a separate minute
	copy of this Order for Referral to Mediation ree Mediation shall be mailed immediately to on.
DONE IN OPEN COURT	Judge/Commissioner
Read Me: If your order for referral to Med Family Department will mail an Order to A	· · · · · · · · · · · · · · · · · · ·
Wari	ning!

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.