

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Comp.# (if applicable): \_\_\_\_\_

## ARIZONA SUPERIOR COURT, PIMA COUNTY

and Petitioner  Respondent	<b>REQUEST FOR ORDER GRANTING OR DENYING REQUEST FOR MEDIATION</b>  <b>No.</b>
-------------------------------------	--

A Request for Mediation was filed and served and 20 days have passed and proof of service has been filed with the Clerk of the Court. Check appropriate boxes:

No Response was filed.

Response was filed.

IT IS REQUESTED that the Court issue its order granting or denying the Request for Mediation.

DATED: \_\_\_\_\_

\_\_\_\_\_  
Petitioner/Plaintiff  
Respondent/Defendant

**ARIZONA SUPERIOR COURT, PIMA COUNTY**

**REQUEST FOR ORDER GRANTING OR  
DENYING REQUEST FOR MEDIATION**

NO.

**ORDER**

The Court has read the Request for Mediation and considered any Response and finds that adequate cause  has  has not been shown.

IT IS ORDERED referring this matter to the Family Center of the Conciliation Court for setting of a mediation date and time. The parties shall attend mediation as set forth in a separate order issued through Conciliation Court. The Family Center of the Conciliation Court may further screen the case for appropriateness for mediation.

IT IS ORDERED that the Request for Mediation be denied.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
JUDGE OF THE SUPERIOR COURT

Copies mailed to Conciliation Court and to parties/attorneys on: \_\_\_\_\_

Party/Attorney's Name, Address, and Telephone:

\_\_\_\_\_  
\_\_\_\_\_