

ADR NEUTRAL NAME, ADDRESS, TELEPHONE, FAX AND EMAIL:

PLAINTIFF/PETITIONER:

DEFENDANT/RESPONDENT:

NOTICE OF ALTERNATIVE DISPUTE RESOLUTION (ADR) SESSION

Arbitration Mediation Neutral Evaluation

CASE NUMBER:

(DO NOT FILE THIS WITH THE COURT)

This information must be mailed or otherwise delivered to all counsel in the action.

The above matter has been scheduled for an ADR Session as follows:

Date: _____

Time: _____ a.m. p.m.

Location: _____

Please bring with you: _____

Dated: _____

(SIGNATURE OF NEUTRAL)

NOTICE OF ALTERNATIVE DISPUTE RESOLUTION (ADR) SESSION