		ATTACHMENT PB-4063
ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS)	TELEPHONE NUMBER:	FOR COURT USE ONLY
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	SANTA CLARA	
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PETITIONER:		
RESPONDENT:		
PROBATE ADR STIPULATION AND ORDER		CASE NUMBER:
<ol> <li>Parties and counsel shall call the Probate Judge's of It is also stipulated that</li></ol>	(name o tral and that the ses	f individual neutral, not organization) shall ssion will take place on ee required per court fee schedule)
Date:		
(Type or Print Name)		(Signature)
(Type or Print Name)		(Signature)
(Type or Print Name)		(Signature)
(Type or Print Name)		(Signature)

(Attach additional signature pages if necessary)

## **ORDER:**

The Early Settlement Conference must be completed no later than the review date.

The Early Settlement Conference review date is set for \_\_\_\_\_, 20\_\_\_\_, at 9:00 a.m. in Department \_\_\_\_\_.

## THE COURT ORDERS.

Date:

Judicial Officer of the Superior Court

Number of Pages Attached: