

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
SUPERIOR COURT OF CALIFORNIA, COUNTY OF NAPA STREET ADDRESS: 825 Brown Street MAILING ADDRESS: 825 Brown Street CITY AND ZIP CODE: Napa, CA 94559	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	
<p style="text-align: center;">NOTICE OF MEDIATOR ACCEPTANCE OR RECUSAL</p> <p style="text-align: center;">Civil Probate, Trusts & Estates Family Law</p>	CASE NUMBER:

THIS NOTICE MUST BE FILED WITH THE COURT AND A COPY MAILED TO ALL PARTIES

I was assigned as the mediator in this case on _____.
(date)

I accept my assignment as the mediator in this case.

I am unable to accept my assignment as mediator in this case because:

Date: _____

Mediator

(type or print name of Mediator)