

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE**

- BLYTHE** 265 N. Broadway, Blythe, CA 92225
- CORONA** 505 S. Buena Vista, Rm. 201, Corona, CA 92553
- MORENO VALLEY** 13800 Heacock St., #D201, Moreno Valley, CA 92553

- MURRIETA** 30755-D Auld Rd., Ste. 1226, Murrieta, CA 92563
- PALM SPRINGS** 3255 Tahquitz Canyon Way, Palm Springs, CA 92262
- RIVERSIDE** 4050 Main St., Riverside, CA 92501

**RI-ADR003**

MEDIATOR (Name, State Bar Number and Address)      TELEPHONE NO: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____	FOR COURT USE ONLY
PLAINTIFF(S):   DEFENDANT(S):	CASE NUMBER:  MEDIATION COMPLETION DATE:
<b>MEDIATOR'S NOTICE OF ACCEPTANCE OR RECUSAL TO COURT-ORDERED MEDIATION</b> (California Rules of Court, Rule 3.855(f); Local Rule Title 3, Division 2)	
<input type="checkbox"/> Assignment: The court has assigned me to serve as the mediator in this case. <input type="checkbox"/> Stipulation: The parties have requested that I serve as the mediator in this case.	

This Notice must be served on all parties and filed with a proof of service within fifteen (15) days of the Notice of Court-Assigned Mediator or notice of the parties' stipulation to the mediator.

**TO THE COURT AND TO ALL PARTIES IN THIS MATTER:**

- A. ACCEPTANCE** I agree to serve as the mediator in this case.
  - The mediation has not yet been scheduled.
  - The mediation has been set for: Date: \_\_\_\_\_  
 Time: \_\_\_\_\_  
 Place: \_\_\_\_\_
  
- B. RECUSAL**
  - I decline to serve as a mediator in this case.
  - (Optional): Reason for recusal: \_\_\_\_\_
  
- C. THE MEDIATION WILL NOT BE SCHEDULED**
  - The parties state that the case has fully settled.
  - Other

Dated: \_\_\_\_\_ (MEDIATOR'S SIGNATURE)

PLAINTIFF(S):	CASE NUMBER:
DEFENDANT(S):	

**PROOF OF SERVICE BY**

**MAIL**     **FAX**     **ELECTRONIC SERVICE**

(Must be attached to original document at time of filing)

I, the undersigned say: I am over 18 years of age and **not a party to this action**. I am a resident of or employed in the county where the mailing took place. My residence or business address is:

\_\_\_\_\_

\_\_\_\_\_

The fax number from which I served the documents is (complete if service was by fax): \_\_\_\_\_

On (date): \_\_\_\_\_ I served a copy of the paper to which this proof of service is attached, **MEDIATOR'S NOTICE OF ACCEPTANCE OR RECUSAL TO COURT-ORDERED MEDIATION**, as follows:

By United States Mail: I served the documents by enclosing them in an envelope addressed as follows:

\_\_\_\_\_

\_\_\_\_\_

and (check one):

- depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
- placing** the envelope for collection and mailing following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.

By fax transmission: Based on an agreement of the parties to accept service by fax transmission, I faxed said document to the persons listed at the fax numbers below. No error was reported by the fax machine that I used. A copy of the record of the fax transmission, which I printed out, is attached.

Names

Fax Numbers


By electronic service. Based on an agreement of the parties to accept service by electronic transmission, I caused the documents to be sent to the persons at the electronic notification addresses listed below:

Names

Email Addresses


I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
(TYPE OR PRINT NAME OF PERSON COMPLETING THIS FORM)

\_\_\_\_\_  
(SIGNATURE OF PERSON COMPLETING THIS FORM)