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| ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, state bar number, and address):*                    TELEPHONE NO: FAX NO.:      E-MAIL ADDRESS *(optional)*: ATTORNEY FOR *(Name)*: | *FOR COURT USE ONLY* |
| **SUPERIOR COURT OF CALIFORNIA, COUNTY OF MADERA**200 South G StreetMadera, California 93637Civil Division |
| PLAINTIFF/PETITIONER:      DEFENDANT/RESPONDENT:       |
| **CONSENT TO CONFER SEPARATELY DURING SETTLEMENT CONFERENCES** | CASE NUMBER:      |

**Pursuant to the Code of Judicial Ethics Canon 3 B(12):**

**A judge may participate in settlement conferences or in other efforts to resolve matters in dispute, including matters pending before the judge.**

**The consent of the parties or their lawyers is required to permit a judge to confer separately with the parties and/or their lawyers during resolution efforts.**

**I hereby consent to allow the judges of the Superior Court of California, County of Madera to confer separately in this case during Settlement Conferences.**

Your signature below indicates an understanding of the canon and express consent that the judge

may confer separately during resolution efforts made during Settlement Conferences.

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

 Attorney or Party without Attorney

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

 Attorney or Party without Attorney

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

 Attorney or Party without Attorney

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

 Attorney or Party without Attorney