SU	PERIOR COURT OF CALIFORNIA, COUNTY OF SANTA BARBARA	FOR COURT USE ONLY		
5	STREET ADDRESS:			
	MAILING ADDRESS:			
Ci	ITY AND ZIP CODE: BRANCH NAME:			
DI A	NATION .			
PLA	INTIFF:			
DEF	ENDANT:			
	MEDIATOR REQUEST FOR POSTPONEMENT OF SMALL CLAIMS HEARING	CASE NUMBER:		
IMPORTANT NOTICE				
The requesting party must mail or personally deliver a copy of this request to each of the other parties [C.C.P. §116.570(a)(2)].				
	REQUEST			
1.	I am the Court authorized mediator in this case.			
2.	I request that the small claims hearing date of be postponed for the following reason:			
3.	I have \square mailed \square personally notified each of the parties in this case of this request.			
4.	4. This is the first continuance (per Court Order, the filing fee is waived).			
I declare under penalty of perjury, under the laws of the State of California, that DATE TYPE OR PRINT DECLARANT'S NAME SIGNATURE		of Declarant		
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ORDER				
	Request for postponement is granted. Hearing date of is vacated and continued to (date) at (time) ALL PARTIES ARE ORDERED TO APPEAR IN COURT.			
	Request for postponement is denied:			
	Request filed too late. Court policy requires that request must be filed with the court at least three court days before the hearing date.			
	Other (specify):			
CASE REMAINS SET ON ORIGINAL HEARING DATE. ALL PARTIES SHOULD BE PRESENT IN COURT ON THAT DATE AND TIME.				
	Dated:			
	Dated:	JUDGE PRO TEM □ DEPUTY CLERK		

Insert Case Name:		CASE NUMBER:
CLERK'S CERTIFIC	CATE OF MAILING	
I certify that I am not a party to this cause and that a true copy sealed envelope addressed as shown, and that the mailing (place), California on (dat	of the foregoing was mailed fire the foregoing and execution	of this certificate occurred at
	Darrel E. Parker, Executive	Officer
	Ву	, Deputy