

# ATTORNEY CHECKLIST

County \_\_\_\_\_ File No. \_\_\_\_\_  
Plaintiff \_\_\_\_\_ Defendant \_\_\_\_\_  
*Plaintiff's Attorney* \_\_\_\_\_ *Defendant's Attorney* \_\_\_\_\_

## PRE-MEDIATION

Consent Order       Voluntary Dismissal       Waiver

\_\_\_\_\_ Date      \_\_\_\_\_ Attorney (*signature*)

## POST- MEDIATION

Full Parenting Agreement or Consent Order      Date signed: \_\_\_\_\_  
 Partial Parenting Agreement      Date signed: \_\_\_\_\_  
 Parenting Agreement NOT signed      \*Note: Attorney will calendar case for court  
 Extend sign/return time until \_\_\_\_\_

\_\_\_\_\_ Date      \_\_\_\_\_ Attorney (*signature*)