ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address)			FOR COURT USE ONLY	
TELEPHONE NO.:	FAX NO. (Optional):			
E-MAIL ADDRESS (Optional):				
SUPERIOR COURT OF CALIFORNIA,	ALAMEDA COUNTY			
STREET ADDRESS:				
MAILING ADDRESS:				
CITY AND ZIP CODE: BRANCH NAME				
PETITIONER/PLAINTIFF:				
RESPONDENT/DEFENDANT:				
OTHER:				
			CASE NUMBER:	
SUMMARY OF CON	ITESTED AND RESOLVED ISS	SUES		
The parties agree that the resolv	ved issues are:			
☐ Custody/Visitation	☐ Child Support	□ Snou	sal Support	
☐ Arrearages	☐ Property Valuation	-		
-			Property Valuation Date Separation Date	
☐ Property Division	☐ Property Characterization			
Reimbursement	☐ Attorney's Fees & Costs	☐ Conte	empt	
Other (specify):				
2. The parties agree that the conte	sted issues are (specify):			
3. Number of pages attached:				
3. Number of pages attached.				
Date:	>			
		☐ ATTORNEY FOR ☐ P	ETITIONER ☐ RESPONDENT ☐ OTHER	
Doto	•			
Date:	F		ETITIONER RESPONDENT OTHER	
		L ATTORNET FOR LIP	LITTONER LI RESPONDENT LI UTREK	