ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address)		For Court Use Only
TELEPHONE NO.:	FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFOR	RNIA, COUNTY OF MENDOCINO	
☐ UKIAH Courthouse 100 North State Street Ukiah, CA 95482	☐ TEN MILE Branch Court 700 South Franklin Street Fort Bragg, CA 95437	
PETITIONER/PLAINTIFF:		
RESPONDENT/DEFENDANT:		
SMALL CLAIMS SETTLEMENT AGREEMENT		CASE NUMBER:
<b>This is not a judgment.</b> Pursuant to CCP §664.6 parties stipulate that the Court shall retain personal and subject matter jurisdiction over this matter and that the terms of settlement are as follows:		
This matter is dismissed without	prejudice and the hearing date	e of is vacated.
Defendant(s) shall pay to Plaintiff(s), the amount of \$ That amount is to be paid in monthly weekly installments until paid in full. Each monthly weekly installment is to be in the amount of \$ on or before the of each month week, beginning on		
installment is to be in the am		That amount is to be ach monthly weekly before the of each
Other terms:		
In the event of default as to any of Noticed Motion Requesting Entry of #MSC-102) to request that the Coulenter judgment.	f Judgment after Default and Sup	pporting Declaration (local form
Judgment shall include the follow	ving:	
1. Balance due in accordance with the terms of this agreement.		
2. The entire amount, less any payments already made, originally asked for in the complaint.		
3. Other		
_		
Date:		
Plaintiff signature	Defendant sig	gnature
Plaintiff's Mailing Address:	Defendant's Mailing	g Address: