

STATE BAR COURT
HEARING DEPARTMENT –

REQUEST FOR CONFIDENTIAL PREFILING SETTLEMENT CONFERENCE

CASE NUMBERS: _____

_____ List all numbers; attach additional sheets as needed.

Please list any other State Bar Court cases, whether or not public, involving the same attorney. Mark any non-public cases with an asterisk (*). Please also list any public State Bar Court cases involving any other attorneys that arise out of the same or closely related facts or events.

Name/Case Number

Name/Case Number

Requesting party: _____

☐ Office of Chief Trial Counsel

☐ Attorney

☐ Counsel for Attorney

☐ Both Parties

Requesting party MUST fill in the following information:

Deputy Trial Counsel: _____

State Bar No.: _____

Email Address: _____

Telephone No.: _____

Attorney: _____

State Bar No.: _____

Email Address: _____

Telephone No.: _____

Counsel for Attorney (if applicable): _____

State Bar No.: _____

Email Address: _____

Telephone No.: _____

- ☐ Both parties have mutually agreed to the available dates listed below. *If possible, please provide the Court with a minimum of two mutually agreed upon dates, including available times.*

Date

Time

Date

Time

- ☐ The parties are unable to agree upon a date. *If no mutually agreed upon date, the Court will independently schedule the PSC date, as provided for in rules 5.30(A) and 5.341(B)(1) of the Rules of Procedure of the State Bar.*

Please return this request form by personal delivery, email, or mail:

State Bar Court
845 S. Figueroa St., 3rd Fl.
Los Angeles, CA 90017-2515
PSCRequests@statebarcourt.ca.gov

State Bar Court
180 Howard Street, 6th Fl.
San Francisco, CA 94105-1639
PSCRequests@statebarcourt.ca.gov

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(For State Bar Court Use Only)

PSC Judge assigned: _____

Requesting party notified of PSC date/time on: _____

Date assigned: _____

By: _____

PSC date/time: _____

Court Clerk