If your mortgage lender has filed to foreclose on your home, you may be entitled to a court ordered settlement conference with your lender to negotiate an agreement that could allow you to avoid foreclosure. There is no financial cost to you for participating in this settlement conference.

If you would like a settlement conference, you must notify the Court that you desire a settlement conference within 30 days of receiving this Notice by doing any of the following:

- 1. Fill out the form and return it to the Court at the address shown on the Summons, then send a copy of the form to the lender's attorney at the address shown on the Summons, **OR**
- 2. Call the Court and request a settlement conference at the phone number shown on the Summons, **OR**
- 3. Go to the Court and request a settlement conference

If you choose to have a settlement conference, the Court will schedule a settlement conference to take place within 25 to 60 days after the date of this Notice.

You have the right to be represented by an attorney or assisted by a mortgage foreclosure counselor, either in person or by telephone, at the settlement conference. The settlement conference is a free, confidential service. Note that some of the documents related to the settlement conference, like the final report and the report on the outcome of telephone conference, are **not confidential** and are public record.

If you need a mortgage foreclosure counselor or an attorney, contact the Indiana Foreclosure Prevention Network at 1-877-Get-Hope (1-877-438-4673), or <a href="https://www.877GetHope.org">www.877GetHope.org</a> two weeks or more before your settlement conference.

Unfortunately, many Hoosiers have been victimized by mortgage foreclosure scams. Beware of persons offering to "save your home," especially when they are asking for payment before any services are performed.

If you believe you have been a victim of a foreclosure scam, you should contact the Office of the Attorney General's Consumer Protection Division by calling 1-800-382-5516.

STA	TE OF INDIANA	A	IN THE COUNTY	COURT TYPE COURT		
COU	JNTY OF <u>COUN</u>	NTY	CAUSE NO. <u>CAUSE OR</u>	CASE NUMBER		
IN F	RE THE MATTER	R OF:				
	ME OF LENDER tioner,		FOR THE SECTION AB	OVE THE DOTTED LINE, LOOK AT		
v.	,			YOU HAVE IN THIS CASE AND		
	UR NAME pondent.					
<u>API</u>	PEARANCE BY	UNREPRESEN'	FED PERSON IN MORTO	GAGE FORECLOSURE CASE		
1.	My name is	OUR NAME	and in	n this case I am not represented		
2.	•	My contact information for receiving legal service of documents and case information as required by Court Rules is:				
	Address:	YOUR ADDRE	SS			
IF YOU CHECK THIS E WILL CONTACT YOU BY EMAIL. IF YOU DO		YOUR EMAIL	ADDRESS			
NOT CHECK THE BOX COURT WILL SEND YOU INFORMATION IN THE MAIL	OU THE		ice at the above email addre NUMBER	?ss.		
CHECK THIS BOX ONI	OR, if in a rela	ated case, you have below:		confidential address, you may		
ATTORNEY GENERAL CONFIDENTIAL ADDRESS 3. This is an MF case type as defined in Administrati			ned in Administrative Rule 8	(B)(3).		
4.  IF THERE ARE OTHER RELATED TO THIS ON SELECT YES AND INCOMMER CAPTION AND CONUMBER BELOW. IF INCHECK NO.	R CASES	r cases related to t Yes No	this case: (If yes, please indi	cate below)		

Caption and case num	nber of related cases: ERE ARE RELATED CASES, FILL THIS IN. IF NOT, LEA	AVE BLANK
	Case No.:	
Caption:	Case No.:	
Caption:	Case No.:	
	on as required by local rule:  ORMATION NEEDED ACCORDING TO LOCAL RULE.	
	SIGN HERE WITH A PEN Signature	
	CERTIFICATE OF SERVICE	
	sent a copy of this document on DATE YOU MAIL ender's attorney at the following address:	by U.S.
	ADDRESS OF LENDER'S ATTORNEY	
	SIGN HERE WITH A PEN	_
	Signature	

STATE OF INDIANA	IN THE	COURT	
COUNTY OF	CAUSE NO.		
IN RE THE MATTER OF:			
Petitioner, v.	FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE OTHER PAPERS YOU HAVE IN THIS CASE AND COPY THE INFORMATION HERE.		
Respondent.			
	ST FOR SETTLEMENT		
I want to participate in a foreclosur Case Number: <u>CASE NUMBER</u>	re prevention settlement	conference.	
SIGN HERE WITH A PEN	DATE		
Signature	Date		
YOUR NAME Printed Name			
YOUR STREET ADDRESS			
Street Address YOUR CITY, STATE AND ZIP			
City, State and Zip Code			
Home Phone: YOUR HOME PHON Cell Phone: YOUR CELL PHON			
Return a copy of this notice to the on the Summons:	lender's attorney at the ER'S ATTORNEY ADDRE	-	
		<del></del>	