

Scheduled Date for Mediation	
Po:	

ATTORNEY'S INFORMATION SHEET AND REQUEST FOR MEDIATION

1. Names, addresses, an	d telephone numbers of parties Plaintiff (identify authorized representatives, if known) and attorneys of record.
Plaintiff:	
Represented by:	
TBA No.:	
Firm Name:	
Firm Address:	
Phone Number:	
Fax Number:	
Email Address:	
2. Names, addresses, an	d telephone numbers of parties Defendant (identify authorized representatives, if known) and attorneys of record
Plaintiff:	
Represented by:	
TBA No.:	
Firm Name:	
Firm Address:	
Phone Number:	
Fax Number:	
Email Address:	
	and telephone numbers of other parties (please specify "intervenor, etc.) (identify authorized wn) and attorneys of record.
Intervenor:	
Represented by:	
TBA No.:	
Firm Name:	
Firm Address:	
Phone Number:	
Fax Number:	
Email Address:	

4. Plaintiff's claims and the Defendant's defenses and counterclaims, including relief sought by parties.		
5. Primary disputed issue	s of law or fact in this case, from your perspective and why you should win?	
6. What is the status of d	scovery? (1) little or none; (2) some discovery done but substantially incomplete: (3) substant	tially
complete.		
7. 5		
/A. Do you have sufficie	t information to form a realistic settlement position? If not, what else is needed?	
7B. History of settlement	damands/affors	
7 b. History of settlement		
0	ha attacking the goodistics for your part. O	
o. How many persons wi	be attending the mediation for your party?	
On behalf of the		
I request that Hal Hargis a	gree to act as mediator, and as attorney of record and on behalf of my client, agree to be bou	ind by the
	ded by the mediator to me, and printed on the attached.	,
Dated:	Signed:	