

CONFIDENTIAL INFORMATION SHEET FOR MEDIATOR

Cause No: _____

Style: _____

Court/Judge/Arbitrator(s): _____

Trial/Arbitration Date: _____

1) Your name, firm name, address, telephone number, cell phone number, and email address:

2) Name and designation of the party you represent: _____

3) Name and title, if applicable, of your party representative who will attend mediation: _____

4) If an insurance company is involved, please provide the following:

a) Name of Company: _____

b) Adjuster or other representative you will be bringing or who will be attending by phone or video conference: _____

c) Policy limits: _____

d) Anything else I should know: _____

5) Summarize the nature of the case and the most contentious issues: _____

6) State the specific relief in dollars being sought by any party seeking to affirmatively recover:

7) Provide any history of settlement demands or offers to date and the current status of the settlement dialogue: _____

8) What is the status of discovery? (Circle one):

- a) Little or none;
- b) Some discovery but substantially incomplete;
- c) Substantially complete; or
- d) Complete.

9) Do you have sufficient information to form a realistic settlement position? If not, what else is needed? _____

10) Additional information for the Mediator (if any): _____

11) Motions pending: _____

12) Total number of people in your party who will be attending the mediation: _____

ON BEHALF OF _____, ONE OR MORE OF THE PARTIES IN THE ABOVE CAUSE, THE UNDERSIGNED ATTORNEY OF RECORD REQUESTS THAT **AMY DUNN TAYLOR** (MEDIATOR), AGREE TO SERVE AS MEDIATOR IN THE ABOVE CAUSE. MY CLIENTS AND I HAVE READ AND AGREE TO BE BOUND BY THE MEDIATION RULES ESTABLISHED BY THE MEDIATOR. I HAVE ADVISED MY CLIENT(S) THAT THE MEDIATOR, INCLUDING HER STAFF, DO NOT SERVE AS COUNSEL TO ANY PARTY AND THAT EACH PARTY MUST RELY EXCLUSIVELY ON THEIR OWN COUNSEL FOR ALL LEGAL ADVICE.

DATED on the _____ day of _____, 20__.

Respectfully submitted,

Attorney of Record

Print Name: