

FIRST JUDICIAL CIRCUIT
CIVIL CASE MEDIATION PROGRAM

MEDIATOR REPORT
(TO BE COMPLETED AT THE END OF MEDIATION)

Mediator Name: _____ Case Number: _____

Referring Judge: _____ County: _____

Case Type:

- | | |
|--------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Business Contract | <input type="checkbox"/> Wrongful Death |
| <input type="checkbox"/> Real Estate Contract | <input type="checkbox"/> Product Liability Personal Injury |
| <input type="checkbox"/> Employment Contract | <input type="checkbox"/> Other Personal Injury |
| <input type="checkbox"/> Motor Vehicle Personal Injury | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Medical Malpractice | <input type="checkbox"/> Unknown |

The undersigned mediator, ____ selected by the attorneys/____ appointed by the court pursuant to order entered on the ____ day of _____, 2003, reports to the Court as follows:

- A. A mediation session was scheduled for and held on _____.
- B. A settlement of this matter
 has been reached
 has been reached *in part*
 has *not* been reached
- C. [*If a settlement was reached*]
The party designated to prepare the settlement agreement and stipulation to dismiss is _____; to be submitted to the court by _____ [date]

Date mediation began: _____ Date ended: _____ Number of Sessions: _____

Hours in mediation: _____ Hours of Preparation: _____

How many from each category attended?

_____ Lawyers
_____ Clients
_____ Non-parties (please list, e.g., witnesses, spouse) _____

Which of the following were used to conduct or assist in the mediation process?

- In-person meetings _____ %
 Telephone _____ %
 E-mail or internet _____ %

Signature of Mediator: _____ Dated: _____