



9TH JUDICIAL DISTRICT ADR REFERRAL SHEET

(to be completed by referral source)

FINAL COURT DATE _____

DATE OF TEMPORARY HEARING _____

IF THERE IS A TEMPORARY ORDER, PLEASE BRING COPY TO MEDIATION.

PLEASE ATTACH ADDITIONAL SHEETS FOR MULTI-PARTY CASES.

TODAY'S DATE: _____ DATE OF ORDER: _____

JUDGE: _____ COUNTY: _____ CASE #: _____

PLAINTIFF

Name (same as filed in this case): _____ Mobile: _____

Email: _____ Other Phone: _____

USPS Address: _____

Plaintiff Attorney: _____ **Phone:** _____

Address: _____ **Email:** _____

DEFENDANT

Name (same as filed in this case): _____ Mobile: _____

Email: _____ Other Phone: _____

USPS Address: _____

Defendant Attorney: _____ **Phone:** _____

Address: _____ **Email:** _____

TYPE OF ADR: MEDIATION

CASE EVALUATION

ARBITRATION

CASE TYPE:

DOMESTIC

GENERAL CIVIL

PROBATE

CRIMINAL

PERSONAL INJURY

CONTRACT

TORT

OTHER (specify) _____

DOMESTIC CASES ONLY - PLEASE SPECIFY ALL THAT APPLY:

DIVORCE

CUSTODY

MODIFICATION

CONTEMPT

VISITATION

CHILD SUPPORT

PROPERTY

ALIMONY

LEGITIMATION

OTHER (specify) _____

HAVE THERE BEEN ALLEGATIONS OF DOMESTIC VIOLENCE BY ANY PARTY?

YES

NO

UNKNOWN

Email completed form to: adr9mediation@gmail.com