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Re:

Submitted by:

Telephone:

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Cause No.: **2015-DCV2361**

**PRE- MEDIATION DISCLOSURES**

**All information will be considered confidential and will not be shared with the other parties.**

**Please submit this form no later than 24 hours before the mediation.**

State what party you represent: \_\_\_\_\_

State who will attend the mediation with you: \_\_\_\_\_

State the names of the other attorneys in the case:

\_\_\_\_\_  
\_\_\_\_\_

Brief description of the type of dispute: \_\_\_\_\_

\_\_\_\_\_

Status of Discovery: \_\_\_\_\_

Trial date, if any: \_\_\_\_\_

Summary of damages claimed / relief sought: by claimant:

\_\_\_\_\_  
\_\_\_\_\_

Issues to be resolved at the mediation from your perspective: \_\_\_\_\_

\_\_\_\_\_

Please summarize any offers that have been made in the case: \_\_\_\_\_

\_\_\_\_\_

Special facts or circumstances which may impact the possibility of settlement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_