STATE OF NORTH	CAROLINA		File No.	
	County		In The General Court Of Justice Superior Court Division	
Name Of Plaintiff(s)				
Name And Address Of Plaintiff's Attorney (Or Pro Se Plaintiff's Address)		DESIGNATION OF MEDIATOR IN SUPERIOR COURT CIVIL ACTION		
Felephone No.	FAX No. (if applicable)		NOTIOE	
Plaintiff's Attorney's Email Address (Or Pr	o Se Plaintiff's Email Address)		NOTICE: Plaintiff's attorney should check and fill out nly one of the two Sections, sign below, and	
V	'ERSUS	return to the Senior Resident Superior Court Judge		
Name Of Defendant(s)			within 21 days after the date of the Order for Mediated Settlement Conference	
Name And Address Of Defendant's Attorn	ney (Or Pro Se Defendant's Address)	and distribute copies as noted below		
			C.C. 7A 20 1. Dula 2 of Madiated Cattlement Conference	
		Trial Date	G.S. 7A-38.1; Rule 2 of Mediated Settlement Conferences Date Of Order Referring Matter To Mediation	
Felephone No.	FAX No. (if applicable)	Deadline For C	Completion Of Mediated Settlement Conference	
Defendant's Attorney's Email Address (Or	Pro Se Defendant's Email Address)	Tentative Trial	Date	
The above named case was has agreed to serve in this on Name And Address Of Certified Mediator	case and is certified pursuant to the	conference. The Rules Of Mediat Telephone No		
		FAX No. (if ap	plicable)	
Mediator's Email Address				
The parties and the mediato agreement.)	r have agreed upon the mediator's i	rate of compensa	tion as follows: (specify all terms of the compensation	
www.ncdrc.org. Click	on "List of Mediators" from the left-hand	I menu then click or	ns a list of certified superior court mediators at "Mediated Settlement Conference Program." You may ears on your screen, click on it for a complete contact and	
_	R COURT APPOINTMENT OF MED	DIATOR		
The above named case was	s referred to a mediated settlement	conference.		
The parties have been unal appoint a certified mediator	ole to agree upon the selection of a to conduct their conference.	mediator and mo	ve the Senior Resident Superior Court Judge to	
Date N	ame Of Attorney (Or Pro Se Party)		Signature Of Attorney (Or Pro Se Party)	
			1	

Original-File Copy-Senior Resident Superior Court Judge or his/her designee Copy-Plaintiff Copy-Defendant Copy-Mediator

	following certified mediator to conduct the mediated settlement cor Name And Address Of Certified Mediator		Telephone No.	
		FAX No. (if applicable)		
Mediator's Email Address				
notice to all attorneys and ur	nrepresented parties of the time and loca	ation of the conference. 7	aking arrangements for the conference and giving timely The mediated settlement conference shall be completed by rence to the Court within ten (10) days after the conference	
Date	Name Of Senior Resident Superior Cour	t Judge (Type Or Print)	Signature Of Senior Resident Superior Court Judge	
	CERTIF	CATE OF SERVICE	E	
served on the above-sele	cted mediator and the parties at the	addresses below by	tion of Mediator in the Superior Court Civil Action was placing a copy of the same in the United States Mail, d in the spaces below. Attach additional sheets if necessary.)	
Name And Address Of Mediator		Name And Addres	s Of Party Or Attorney	
Name And Address Of Party Or Atte	orney	Name And Addres	s Of Party Or Attorney	
Name And Address Of Party Or Atte Name And Address Of Party Or Att	ŕ		s Of Party Or Attorney s Of Party Or Attorney	

Signature Of Party or Party's Attorney

ORDER OF APPOINTMENT

Name Of Party (Type Or Print)

Date