

N.C. Industrial Commission
Mediation Section
4342 Mail Service Center
Raleigh, NC 27699-4342

I.C. File No(s). _____
Carrier No. _____
_____ County

_____, Plaintiff
v.
_____, Defendant
_____, Carrier

REPORT OF MEDIATOR

Mediator _____ Telephone () - Fax () -

Address _____
Street Address/P.O. Box City State ZIP Code

The undersigned mediator reports the following results of a mediated settlement conference in this case:

Conference was held and completed on: __/__/__
 was held but not completed because: _____
 was not held because: _____

Anticipated Date of Completion: __/__/__ Number of sessions held: __

If settled before conference, person who notified mediator: _____

Names of parties, attorneys, insurance representatives or others who were absent: _____

The parties reached: agreement on all issues. an impasse. agreement on the following issues:

If this case was not settled in mediation, the parties estimate that the length of the hearing in this case will be _____

Issues settled to be disposed of by: clincher. other agmt. voluntary dismissal. removal from hearing docket

The person who will submit the agreement/clincher / dismissal to the Commission is _____
_____ who will submit it by _____ (date).

Mediator's Fee

PREPARATION FEE: \$ _____
(\$125.00 for appointed mediator.)

MEDIATION FEE: \$ _____
Total time spent in Mediated Settlement Conference: _____ hours
(\$125.00 per hour for appointed mediator, billed in quarter hour segments.)

OTHER FEE (Postponement fee, etc...., if any) \$ _____

TOTAL FEE \$ _____

Mediator's Federal Tax ID No. _____

All fees to the mediator have been paid except as follows:
Party owing fee Amount owed Address of party

I have mailed this report to the Commission within seven days of the conclusion of the mediated settlement conference.

This the _____ day of _____, _____
_____ Mediator

This report is to be returned to the Commission in all cases, whatever the mediation results.