

**Medina County Court of Common Pleas
Office of Dispute Resolution
MEDIATION CASE SUMMARY**

CAPTION:

CASE NO.

MATERIAL FACTS:

LEGAL ISSUES:

STATUS OF DISCOVERY:

LIST SPECIAL DAMAGES AND SUMMARIZE INJURIES OR DAMAGES:

NEGOTIATION HISTORY TO DATE:

POSITION OF THE PARTIES:

Attorney Name: _____

Address: _____

Phone: _____

Fax: _____

Attorney for: _____

Expand form or include attachments as needed. (BRIEF SUMMARIES ONLY – DO NOT SEND VOLUMINOUS RECORDS).

Mail or fax to:

Medina County Court of Common Pleas - Mediation

120 W. Washington St. Suite 3A

Professional Building

Medina, Ohio 44256

(330) 764-8733 (fax)

**at least four (4) business days prior to the date of mediation, with a copy to opposing counsel.
This summary should not be filed with the Clerk of Courts, but sent directly to the Mediator.**