

Mediation & Alternative Dispute Resolution

PROVIDER INFORMATION

Case / Matter Ref:

CLIENT INFORMATION

CO-PARTY / ADDITIONAL BILLING (IF APPLICABLE)

DESCRIPTION OF MEDIATION SERVICES	HOURS / QTY	RATE / FEE	TOTAL AMOUNT

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Subtotal: -----

Tax / Retainer -----

Credit: -----

Total Due: -----

PAYMENT TERMS & METHODS

MEDIATOR SIGNATURE

CLIENT / REPRESENTATIVE SIGNATURE