

**STATE OF MICHIGAN
LIVINGSTON COUNTY
44TH CIRCUIT COURT**

**ORDER FOR MEDIATION
(DOMESTIC)**

CASE NO.

Court Address:
204 S. Highlander Way, Howell, MI 48843

Court Telephone No.
(517) 546-9816

Plaintiff's name, address, and telephone no.

v

Defendant's name, address, and telephone no.

Plaintiff's attorney, bar no., address, and telephone no.

v

Defendant's attorney, bar no., address, and telephone no.

IT IS ORDERED:

- This case is ordered to mediation pursuant to MCR 3.216(C)
 by agreement of the parties.
 on the Court's own motion.
- The mediator will be:

Name of Mediator
 The ADR clerk shall assign a mediator as provided by the Court's alternative dispute resolution plan.
- Mediation must be completed within 30 60 90 _____ days of the date this order is entered. The mediator shall promptly confer with the parties to schedule mediation within the deadline.
- The costs of mediation shall be divided as follows: Plaintiff _____% Defendant _____%, unless otherwise agreed to by the parties or ordered by the Court or, for persons unable to pay for mediation, as provided by the Court's alternative dispute resolution plan.
- The parties shall be present at the mediation. The parties must immediately provide a copy of this order to the mediator.
- The attorneys who intend to try the case shall attend the mediation.
- The parties shall ensure that the Mediator provides, in writing, mediation results pursuant to MCR 2.411(C)(3).

Date

Hon. L. Suzanne Geddis
Family Court Judge

Approved as to form and content:

I certify that on _____, 20____, a copy of this order was sent to the parties/attorneys by ordinary mail.

Assignment Clerk