

**GALLIPOLIS MUNICIPAL COURT, GALLIA COUNTY  
MEDIATION PROGRAM**

Date: \_\_\_\_\_

Claimant(s)

Respondent(s)

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

Amount Claimed: \_\_\_\_\_

Nature of Claim (*Check appropriate line(s)*)

- Money due on account
- Security deposit
- Damage to real property
- Faulty repair work
- Wages/Salary/Commission
- Personal injury
- Tax/Utilities

- Money lent
- Rent
- Damage to personal property
- Dishonored check
- Damage to motor vehicle
- Faulty goods or services
- Fraud/Misrepresentation
- Other

**CLAIMANT'S STATEMENT**

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Your case has been selected for mediation. Although mediation will allow you to fully present your side of the dispute which gave rise to the mediation, you will not need to worry about bringing evidence or witnesses to prove your case. All you are encouraged to bring is an open mind and a determination to resolve your problem. The mediation process will simply provide a forum for the parties to openly discuss the matter in a productive fashion that will hopefully lead to an agreement so the time and expenses of a court proceeding can be avoided.

You will find the date and time of your mediation below on the space provided. It is important that you appear for mediation on time (we recommend that arrive about 10 minutes early) so both parties can have a full opportunity to be heard. **The mediation will take place at the Gallipolis Municipal Court, 49 Olive Street, Gallipolis, Ohio.** Upon arrival, please check in with the Clerk. Your mediation will take place with the mediator, Jason D. Holdren.

If you have any questions, please call (740) 446-9400.

**YOUR MEDIATION IS SCHEDULED FOR:** \_\_\_\_\_