REQUEST FOR REFERRAL TO MEDIATION WITH JOSEPH S. BERMAN, ESQ.	DOCKET NUMBER	Trial Court of Massachusetts The Superior Court

CASE NAME:

_____

VS

_____

☐ Clerk of Courts

☐ County

COURT NAME & ADDRESS

Counsel of record, whose signatures appear below, hereby request that this Court refer this matter to mediation, with Joseph S. Berman, Esq. The attorneys have discussed mediation with their clients, and all parties and counsel are open to resolving their dispute through mediation.

By signing below, counsel affirm that one or all of the parties, due to financial constraints, are unable to engage the services of a private mediator at rates currently charged for such services.

FOR THE PLAINTIFF	FOR THE DEFENDANT
_____	_____
_____	_____
_____	_____
_____	_____

DATE: