

**REQUEST FOR REFERRAL TO  
MEDIATION WITH THE HON.  
PAUL A. CHERNOFF (RET.)**

DOCKET NUMBER

**Trial Court of Massachusetts  
The Superior Court**



CASE NAME:

\_\_\_\_\_  
VS  
\_\_\_\_\_

COURT NAME & ADDRESS

Counsel of record, whose signatures appear below, hereby request that this Court refer this matter to mediation with the Honorable Paul A. Chernoff (ret.). 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 at least one of the parties is of limited means and that engaging a private mediator would constitute a substantial financial hardship for that person.

FOR THE PLAINTIFF

FOR THE DEFENDANT

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DATE: