

8<sup>TH</sup> JUDICIAL DISTRICT MEDIATION PROGRAM

MEDIATION CERTIFICATE OF ATTENDANCE

TO: The Clerk of Court of \_\_\_\_\_ County  
(County where the dissolution case is filed)

RE: Case # \_\_\_\_\_

Names of parties: \_\_\_\_\_  
\_\_\_\_\_

I certify that the above parties attended an initial mediation session with me.

\_\_\_\_\_  
Mediator

\_\_\_\_\_  
Date

**Same day as mediation session:**

- \_\_\_\_\_ Send original to Clerk of Court in county of filing
- \_\_\_\_\_ Keep copy for own files
- \_\_\_\_\_ Send copy to program director/District Court Administration
- \_\_\_\_\_ Send copy to self-represented litigants
- \_\_\_\_\_ Send copy to Guardian ad Litem (if any)
- \_\_\_\_\_ Send copy to parties' attorneys:

\_\_\_\_\_  
\_\_\_\_\_