

N.C. Industrial Commission
Mediation Section
4342 Mail Service Center
Raleigh, NC 27699-4342

I.C. File No(s). _____
Carrier No. _____
_____ County

_____, Plaintiff
v.
_____, Defendant
_____, Carrier

DESIGNATION OF MEDIATOR

Appearances

Plaintiff's Attorney _____ Telephone () - _____

Address _____ Fax () - _____

Defendant's Attorney _____ Telephone () - _____

Address _____ Fax () - _____

THIS FORM IS TO BE COMPLETED BY EITHER THE PLAINTIFF OR THE DEFENDANT WITHIN THE TIME SPECIFIED IN THE COMMISSION'S ORDERS AND THE ICMSC RULES.

Pursuant to the Order entered in the above captioned case, referring it to a mediated settlement conference, the parties have selected the mediator named below, who has agreed to serve.

Mediator _____ Telephone () - _____ Fax () - _____

Address _____
Street Address/P.O. Box City State ZIP Code

The above named mediator: (check one)

- Meets the qualifications set forth in ICMSC Rule 8(b).
- Is qualified to mediate this case by reason of the following training and experience

This the ____ day of _____, ____.

Signature of Plaintiff / Defendant or Representative