

GENERAL INFORMATION

<input checked="" type="checkbox"/>	CHECK AS COMPLETE
<input type="checkbox"/>	Case file date
<input type="checkbox"/>	Style
<input type="checkbox"/>	Court
<input type="checkbox"/>	Judge
<input type="checkbox"/>	Connected or related litigation
Mediation	
<input type="checkbox"/>	Ordered or voluntary
<input type="checkbox"/>	Mediation referral initiated by
<input type="checkbox"/>	Prior mediations?
<input type="checkbox"/>	Mediator
<input type="checkbox"/>	Results
<input type="checkbox"/>	Reason for failure
Trial or Hearing	
<input type="checkbox"/>	Current setting
<input type="checkbox"/>	Prior settings \ continuances
<input type="checkbox"/>	Estimated length of trial
<input type="checkbox"/>	Fact finder (jury, judge, arbitrator)
<input type="checkbox"/>	Discovery deadline for fact discovery
<input type="checkbox"/>	Discovery deadline for expert discovery
Status of dispositive motions	
<input type="checkbox"/>	Have you filed
<input type="checkbox"/>	Has the other side filed
<input type="checkbox"/>	Has it been decided
<input type="checkbox"/>	What was the outcome

LOGISTICS

<input type="checkbox"/>	Counsel's cell phone number (for use during mediation only)
<input type="checkbox"/>	Caucus rooms needed
<input type="checkbox"/>	Lunches needed
<input type="checkbox"/>	AV needs
<input type="checkbox"/>	Other needs
<input type="checkbox"/>	Disabilities require accommodation
<input type="checkbox"/>	Interpreter needed
<input type="checkbox"/>	Any time impediments for any of your participants
<input type="checkbox"/>	Any authority issues from your side
<input type="checkbox"/>	Other needs

LIABILITY

<input type="checkbox"/>	Claimant's claims
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<input type="checkbox"/>	Respondent's affirmative defenses
<input type="checkbox"/>	Counterclaims \ Crossclaims or other relevant claims
	Key liability documents or exhibits
<input type="checkbox"/>	Your side
<input type="checkbox"/>	Opposition
	Key disputed issues
<input type="checkbox"/>	Law
<input type="checkbox"/>	Fact

DAMAGES

	Claimant's damages
<input type="checkbox"/>	Actual damages
<input type="checkbox"/>	Compensatory damages claimed
<input type="checkbox"/>	Punitive damages claimed
<input type="checkbox"/>	Pre-judgment interest
<input type="checkbox"/>	Fees
<input type="checkbox"/>	Other forms of damages
<input type="checkbox"/>	Other relief requested
	Counterclaim or other claim damages
<input type="checkbox"/>	Actual damages
<input type="checkbox"/>	Compensatory damages claimed
<input type="checkbox"/>	Punitive damages claimed
<input type="checkbox"/>	Pre-judgment interest
<input type="checkbox"/>	Fees
<input type="checkbox"/>	Other forms of damages
<input type="checkbox"/>	Other relief requested
	Collections issues
<input type="checkbox"/>	Are any issues anticipated
<input type="checkbox"/>	Will any issues be claimed
<input type="checkbox"/>	Non-monetary relief
	Best day
<input type="checkbox"/>	Claimant's
<input type="checkbox"/>	Respondent's
<input type="checkbox"/>	Other
	Key damages documents or exhibits
<input type="checkbox"/>	Your side
<input type="checkbox"/>	Opposition
	Key disputed issues
<input type="checkbox"/>	Law
<input type="checkbox"/>	Fact
	Liens or other special considerations

FEES AND EXPENSES

	To date
<input type="checkbox"/>	Fees

<input type="checkbox"/>	Expenses
<input type="checkbox"/>	Expected through determination
<input type="checkbox"/>	Fees
<input type="checkbox"/>	Expenses
<input type="checkbox"/>	Other considerations
<input type="checkbox"/>	Contingency involved
<input type="checkbox"/>	Terms

READINESS FOR MEDIATION

<input type="checkbox"/>	Do you have sufficient information to evaluate your claims and their claims to make an intelligent decision?
<input type="checkbox"/>	Do the other parties?
<input type="checkbox"/>	Are all of the necessary parties in the case or participating in mediation?

PRIOR NEGOTIATIONS

<input type="checkbox"/>	Initial Demands \ Offers
<input type="checkbox"/>	Discussions since
<input type="checkbox"/>	Last discussion
<input type="checkbox"/>	Who should make the first offer or demand in mediation

MEDIATION SPECIFICS

<input type="checkbox"/>	What is your client's personality like
<input type="checkbox"/>	What is the opposing party like
<input type="checkbox"/>	How is your relationship with opposing counsel
<input type="checkbox"/>	Is there a need for a joint session
<input type="checkbox"/>	What issues, if any, would there be with a joint session if needed
<input type="checkbox"/>	Who will attend for your client
<input type="checkbox"/>	Who do you expect to attend from the other side
<input type="checkbox"/>	Is there anyone who needs to be involved from the other side you don't anticipate participating
<input type="checkbox"/>	Are there any special impediments to settlement
<input type="checkbox"/>	Other considerations for resolution – emotional or non-monetary issues
<input type="checkbox"/>	What does the other side care about besides money that might be relevant at mediation