



**9TH JUDICIAL DISTRICT ADR REFERRAL SHEET**  
**(to be completed by referral source)**

Final Court Date \_\_\_\_\_  
Date of Temporary Hearing \_\_\_\_\_  
If there is a temporary order, please bring copy to mediation.  
Please attach additional sheets for multi-party cases.

JUDGE: \_\_\_\_\_ COUNTY: \_\_\_\_\_ CASE #: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_  
DATE OF ORDER: \_\_\_\_\_

**PLAINTIFF**

Name (same as filed in this case): \_\_\_\_\_ Email: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_ Mobile/Cell Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

**Plaintiff Attorney:** \_\_\_\_\_ **Office Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**DEFENDANT**

Name (on court filing): \_\_\_\_\_ Email: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_ Mobile/Cell Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

**Defendant Attorney:** \_\_\_\_\_ **Office Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**TYPE OF ADR:**      **MEDIATION**              **CASE EVALUATION**              **ARBITRATION**

**CASE TYPE:**    DOMESTIC                      GENERAL CIVIL                      PROBATE  
                         CRIMINAL              TORT                      CONT                      RACT  
                         PERSONAL INJURY  
                         OTHER (specify) \_\_\_\_\_

**DOMESTIC CASES ONLY - PLEASE SPECIFY ALL THAT APPLY:**

DIVORCE              CUST      ODY              MODIFICATION  
CONTEMPT              VISITATION              CHILD      SUPPORT  
PROPERTY              ALIMONY              LEGITIMATION  
OTHER (specify) \_\_\_\_\_

**HAVE THERE BEEN ALLEGATIONS OF DOMESTIC VIOLENCE BY ANY PARTY?**                      **YES**              **NO**              **UNKNOWN**

**Mail, Email or Fax completed form to:**    9<sup>th</sup> JAD ODR, 311 Jesse Jewell Parkway, Ste 104, Gainesville, GA 30501  
Phone: 770.535.6909  
Facsimile: 770.531.4072  
Email: adr9mediation@gmail.com