

Workers' Compensation Mediation Services Engagement Agreement

Re:

Counsel:

Thank you for selecting me as your mediator. Please allow this letter to confirm the date, time, and parameters of the mediation and the terms of my engagement. All mediations are conducted via Zoom unless otherwise specified.

Date:

Duration:

OJCC Number:

Location:

Preparation for Mediation Mediation Case Summaries are greatly appreciated and encouraged. If you wish to send a summary or other documents to me to review prior to the mediation, please send them to me via email at Leslie@tampamediationgroup.org at least five (5) business days in advance of the mediation, if possible.

Mediation Fees

\$150 per hour, split between Carrier and Claimant, unless otherwise agreed.

There is a two hour minimum for half day cases and a six hour minimum for full day cases. The fee shall be divided equally among the lawyers unless otherwise agreed. Law firms and lawyers, not their clients, are responsible for the mediation bill. Payments shall be made within 15 days of the date of the invoice and is not conditioned on settlement of the case or receipt of settlement funds.

Cancellation Policy

There is no cancellation fee.

Invoices and Payments

An invoice for the mediation will be issued immediately following the mediation conference and is due upon receipt. Please make checks payable to:

Tampa Mediation Group (FEI # 33-4480368)
9911 Tree Tops Lake Road
Tampa, FL 33626

Thank you again, for allowing me to serve as your mediator in this matter.

Leslie C. Riviere, Esq.
Certified Mediator