



SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
Tax Division
500 Indiana Avenue NW, Suite 4100, Washington DC 20001
(202) 879-1737 | www.dccourts.gov

Case Caption: _____

Case Number: _____

Mediation Scheduling Request
(Praecepte)

I, _____ am the Petitioner / Respondent (*check one*):

Petitioner and Respondent agree (*check one*):

This case is not appropriate for mediation.

To appear for a mediation conference at the Multi-Door Dispute Resolution Division of the Superior Court of the District of Columbia, 410 E Street, NW, Second Floor, Washington, D.C.,

on _____ at _____ AM PM in Track II Track III.
Date Time (Select One)

Respectfully submitted,

Plaintiff / Petitioner or Attorney Name: (Print Name)		Defendant / Respondent or Attorney Name: (Print Name)	
Address:		Address:	
Signature:		Signature:	
Email Address:		Email Address:	
Telephone Number:	Attorney Bar Number:	Telephone Number:	Attorney Bar Number: