Texas Anchor LLC Mediation Services Daniel G. Garcia, Mediator (210) 440-8074

Email completed form to: Daniel@TexasAnchorLLC.com or fax to (210) 239-2030

| CAUSE NO. | | | |
|-----------------------|-----------------------------------|----------------------|----------------------------------------|
| Petitioner | /Plaintiff: | § S | IN THE DISTRICT COURT |
| Respondent/Defendant: | | \$ \$ \$ \$ | JUDICIAL DISTRICT |
| | | § | COUNTY, TEXAS |
| | Initial | Mediation | Questionnaire |
| | Identific | ation of Pa | arties and Counsel |
| 1. | State any proposed dates for the | e mediation b | pased on availability of the parties?, |
| 2. | Do the parties agree to Zoom m | nediation? i(I | If not, is there an agreed location? |
| 3. | Describe briefly the issues of th | ie case. | |
| 4. | Is there any issue of domestic | violence alle | eged against any party? |
| 5. | Have the parties agreed to the p | ayment arran | ngement for Mediation Services? |
| 6. | | | |
| 7. | Counsel for Petitioner/Plaintiff: | : | |
| | Name: | | |
| | Law Firm: | | |
| | Address: | | |
| | Phone: | | |
| | Fax: | | |
| | Email: | | |
| 8. | Counsel for Respondent/Defendent | dant | |
| | Name: | | |
| | Law Firm: | | |
| | Address: | | |
| | Phone: | | |
| | Fax: | | |
| | Email: | | |
| 9. | Other Parties: Intervenor (if any | | |
| | Counsel for Other Party/Interven | nor: | |
| | Name: | | |
| | Law Firm: | | |
| | Address: | | |
| | Phone: | | |
| | Fax: | | |
| | Email: | | |
| repared by: | | | |
| Contact info | | | |
| | | | |