

**Please Print and Submit to the HCBA**

**FALL SETTLEMENT WEEK**

**OCTOBER 26-30, 2009**

*Presented By:*

**THE HIDALGO COUNTY BAR ASSOCIATION**

**NOTICE TO ALL ATTORNEYS**

***Submission Deadline: October 10th***

- All cases pending in Hidalgo County are required to be mediated before going to trial.
- The administrative fee for cases ORDERED to HCBA Settlement Week by the Courts is \$250.00 per lawyer.
- The administrative fee for voluntary submissions is only \$150.00 per lawyer.

HCBA Settlement Week is a very cost effective and efficient method of settling your case. With the help of our very qualified volunteer mediators, hundreds of cases are mediated during this week. In order for FALL Settlement Week to be as big a success as previous years, we need volunteer mediators. If you are willing to serve as a volunteer mediator, please register by filling out the Volunteer Mediator Data Sheet that is included in the Settlement Week Packet. If you are a member of a law firm, we encourage other attorneys in your firm to volunteer as well.

The Hidalgo County Bar Association FALL Settlement Week 2009 is scheduled for **OCTOBER 26-30, 2009**. If you have any cases ripe for mediation, please complete the attached *Settlement Week Packet* and return it to the Hidalgo County Bar Association no later **Friday, October 9, 2009**, along with the \$150.00 administrative fee per party per case. Since this is a time sensitive event and requires a lot of paperwork on the part of our staff and volunteers, a \$25.00 late fee will be charged to each party for cases submitted after **Friday, October 9, 2009** (subject to the coordinator's approval). All cases submitted for consideration should be carefully reviewed by you and a separate *Settlement Week Packet* completed for each case.

All cases that are submitted for mediation will go through a selection process. In the event that your case is selected, a maximum of three hours will be allotted for each mediation session (\$150.00/session) and attorneys will be ordered to appear with their clients or representatives for the purpose of engaging in meaningful settlement negotiations before a volunteer court-appointed mediator. Mediation sessions should be held in the law offices of the mediator or attorneys. Certified, non-attorney mediators may serve on cases unless an objection is made by the attorneys (included in packet).

Remember, your volunteer efforts support our Association and its projects. As stated in the Settlement Week Packet, for every three cases your firm submits for mediation, you should designate someone from your firm to be a volunteer mediator on another case. Failure to submit a Mediator Sheet may cause your case to be rejected if we don't have enough volunteers. Without volunteer mediators, this process CANNOT work.

We look forward to your participation and anticipate a successful *Settlement Week*. Should you have any questions, please feel free to call Jeri Worthington at 380-1691 or e-mail her at [jeriworthington@aol.com](mailto:jeriworthington@aol.com)

**HIDALGO COUNTY BAR ASSOCIATION**

***Jeri L. Worthington***

Executive Director

## SETTLEMENT WEEK APPLICATION, INSTRUCTIONS & CHECKLIST INSTRUCTIONS

1. **ATTORNEYS MUST AGREE TO THE MEDIATION.** Packets received without the proper signature of attorneys involved in the case will not be considered.
2. **One *Settlement Week Packet* must be returned for each case submitted by the FRIDAY, OCTOBER 9, 2009 DEADLINE.** An attorney submitting three or more cases for mediation must volunteer as a mediator or must have a representative from his firm volunteer.
3. **All information must be typed and completed or it will be considered incomplete and returned.**
4. **Each case must be submitted in a separate file folder labeled with the cause number, party names, and attorneys. TO ENSURE THAT ALL DOCUMENTS HAVE BEEN ENCLOSED, PLEASE PLACE A CHECK BY THE FOLLOWING DOCUMENTS YOU ARE FORWARDING:**

- \_\_\_\_\_ Settlement Week Case Information Data Sheet
- \_\_\_\_\_ Certificate of Conference (All attorneys' signatures required)
- \_\_\_\_\_ Certificate of Service (signed by submitting attorney)
- \_\_\_\_\_ Case Summary
- \_\_\_\_\_ Statement of Facts
- \_\_\_\_\_ Original and one copy of the above
- \_\_\_\_\_ Selected three alternative times for mediation
- \_\_\_\_\_ *Pre-addressed and stamped letter-size envelopes* (\$0.67 postage) for each attorney of record, and one blank envelope for designated mediator
- \_\_\_\_\_ *A non-refundable check* in the amount of \$150.00 for each party\*. (TAX I.D. # 74-2740952)
- \_\_\_\_\_ \$25.00 late fee per party for cases submitted after FRIDAY, OCTOBER 9, 2009, subject to coordinator's approval.

5. **Has the submitting attorney completed and furnished opposing counsel a copy of the above?**
6. **Packets should be submitted to the following address by no later than FRIDAY, OCTOBER 9, 2009:**

Hidalgo County Bar Association  
Attn: Settlement Week  
314 S. Closner  
Edinburg, TX 78539

7. **ANY INCOMPLETE PACKETS WILL BE RETURNED, WITHOUT A REFUND.**
8. **Questions can be directed to Jeri Worthington at 380-1691 or via e-mail at [jeriworthington@aol.com](mailto:jeriworthington@aol.com)**

**\*Party:** For the purposes of mediation, a party is defined as: 1) each individual in a case; and/or 2) each family will be considered one party.

# SETTLEMENT WEEK CASE INFORMATION DATA SHEET

1. Cause No.: \_\_\_\_\_
2. Court: \_\_\_\_\_
3. Style of Case: \_\_\_\_\_
4. Number of Parties:    \_\_\_ Plaintiff(s)            \_\_\_ Defendant(s)            \_\_\_ Other(s)
5. Type of case:  
\_\_\_ P/I involving M/V                            \_\_\_ P/I other than M/V  
\_\_\_ W/C (Partial Disability)                    \_\_\_ W/C (Total Disability)  
\_\_\_ Bad Faith                                        \_\_\_ Products Liability  
\_\_\_ Contract Dispute                            \_\_\_ DTPA  
\_\_\_ Business/Commercial                      \_\_\_ Collection  
\_\_\_ Employment Law                            \_\_\_ Real Estate  
\_\_\_ Family (Custody/ Visitation)            \_\_\_ Family (Property/Debt)  
\_\_\_ Other (Please Specify)
6. Date Suit Filed: \_\_\_/\_\_\_/\_\_\_    7. Date of Incident: \_\_\_/\_\_\_/\_\_\_    8. Trial Date: \_\_\_/\_\_\_/\_\_\_
9. Discovery Status: (Please explain status)  
\_\_\_ Complete    \_\_\_ Not Started    \_\_\_ Substantially Complete (*explain in space below*):
10. Settlement Negotiations Initiated:    \_\_\_ Yes            \_\_\_ No  
Plaintiff's Last Demand/Offer: \$ \_\_\_\_\_    Defendant's Last Demand/Offer: \$ \_\_\_\_\_
11. **Attorneys of Record and Parties:**  

Pltf. Atty: _____	Dfndnt. Atty: _____
Firm Name: _____	Firm Name: _____
Address: _____	Address: _____
City: _____	City: _____
State & Zip: _____	State & Zip: _____
Phone No.: _____	Phone No.: _____
Fax No.: _____	Fax No.: _____
E-mail: _____	E-mail: _____
Name of Party: _____	Name of Party: _____
Other Party: _____	Other Party: _____
Firm Name: _____	Firm Name: _____
Address: _____	Address: _____
City: _____	City: _____
State & Zip: _____	State & Zip: _____
Phone No.: _____	Phone No.: _____
Fax No.: _____	Fax No.: _____
E-mail: _____	E-mail: _____
Name of Party: _____	Name of Party: _____

12. Name of Insurance Carriers if any and parties they represent:

13. Please select the best three times for Mediation:

Monday, October 26, 2009:

\_\_\_ 8 am - 11 am      \_\_\_ 11 am - 2 pm      \_\_\_ 2 pm - 5 pm

Tuesday, October 27, 2009:

\_\_\_ 8 am - 11 am      \_\_\_ 11 am - 2 pm      \_\_\_ 2 pm - 5 pm

Wednesday, October 28, 2009:

\_\_\_ 8 am - 11 am      \_\_\_ 11 am - 2 pm      \_\_\_ 2 pm - 5 pm

Thursday, October 29, 2009:

\_\_\_ 8 am - 11 am      \_\_\_ 11 am - 2 pm      \_\_\_ 2 pm - 5 pm

Friday, October 30, 2009:

\_\_\_ 8 am - 11 am      \_\_\_ 11 am - 2 pm      \_\_\_ 2 pm - 5 pm

14. NON-ATTORNEY DISCLOSURE:

A certified non-attorney mediator may be assigned as mediator in your case. Objection to the assignment of a certified non-attorney mediator must be indicated below. If no indication of an objection is noted, it will be presumed that all parties approve of the use of a certified non-attorney mediator.

\_\_\_\_\_ I OBJECT to the assignment of a non-attorney mediator.

15. CERTIFICATE OF CONFERENCE:

On the \_\_\_ day of \_\_\_\_\_, 2009, all counsel of record in the above-styled and numbered cause have agreed to submit this case for mediation during the week of OCTOBER 27-31, 2009 to the Hidalgo County Bar Association's Settlement Week. Furthermore, the attorneys of record certify to the Court that all parties concur with the two alternate dates and times selected per week.

\_\_\_\_\_  
Signature, Plaintiff's Attorney

\_\_\_\_\_  
Signature, Defendant's Attorney

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Typed Name

16. CERTIFICATE OF SERVICE:

I hereby certify that a true and correct copy of the above and foregoing Settlement Week Data Information Sheet has been served upon all counsel of record on the \_\_\_\_\_ day of \_\_\_\_\_, 2009, in compliance with the Texas Rules of Civil Procedure.

\_\_\_\_\_  
Signature, Submitting Attorney

\_\_\_\_\_  
Typed Name

**17. SUMMARY OF CASE: (Attach additional sheets as necessary.)**

**a.) Include the nature of claims and/or defenses.**

**b.) Estimation of damages (please exchange recent medical records with opposing party prior to mediation).**

**c.) Any special circumstances or issues.**

**\* Please attach a copy of any police report, medical, or significant reports to allow the mediator to be better prepared and able to assist you.**

**18. STATEMENT OF FACTS: (Provide a brief statement of facts in the space below.)**

**VOLUNTEER MEDIATOR DATA SHEET**

The Hidalgo County Bar Association Settlement Week is scheduled for the week of **OCTOBER 26-30, 2009**. If you are interested in participating as a mediator, please fill out the data sheet below and submit it to the following address as soon as possible:

Hidalgo County Bar Association  
Attn: Settlement Week  
314 S. Closner  
Edinburg, TX 78539  
Phone: 380-1691 Fax: 383-5322  
E-mail: [jeri@hidalgobar.org](mailto:jeri@hidalgobar.org)

**Note: Each firm is required to furnish one qualified volunteer mediator per every three cases submitted.**

NAME: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY, STATE, ZIP: \_\_\_\_\_  
STATE BAR NO.: \_\_\_\_\_ DATE LICENSED IN TEXAS: \_\_\_\_\_

Please indicate below if you have participated in any of the following mediation trainings:

\_\_\_ I am NOT an attorney, but have attained the following training:  
\_\_\_ I AM a licensed attorney and have attained the following training:  
    \_\_\_ 40 hours -- certified as mediator                      \_\_\_ 8 hours -- mediation training course  
    \_\_\_ 4 hours -- settlement orientation                      \_\_\_ Other -- mediation related course

Please Indicate the Dates and Times You Will be Available to Mediate Cases:

13. Please select the best three times for Mediation:  
Monday, October 26, 2009:  
    \_\_\_ 8 am - 11 am      \_\_\_ 11 am - 2 pm      \_\_\_ 2 pm - 5 pm  
Tuesday, October 27, 2009:  
    \_\_\_ 8 am - 11 am      \_\_\_ 11 am - 2 pm      \_\_\_ 2 pm - 5 pm  
Wednesday, October 28, 2009:  
    \_\_\_ 8 am - 11 am      \_\_\_ 11 am - 2 pm      \_\_\_ 2 pm - 5 pm  
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    \_\_\_ 8 am - 11 am      \_\_\_ 11 am - 2 pm      \_\_\_ 2 pm - 5 pm