STATE OF	NORTH CAROLINA			File No.
	County			In The General Court Of Justice ☐ District ☐ Superior Court Division
Name Of Plaintiff(s)				
				NOTICE OF
			_	NOTICE OF
				VITHDRAWAL/DISQUALIFICATION
	VEDOUG			OF MEDIATOR AND ORDER FOR
Name Of Defendant/a	VERSUS			SUBSTITUTION OF MEDIATOR
Name Of Defendant(s)				
		S	Settle	G.S. 7A-38.1, G.S. 7A-38.4A; 2(d) of the Rules for Mediated Settlement Conferences and Other ement Procedures in Superior Court Civil Actions; Rule 2(d) of the or Settlement Procedures in District Court Family Financial Cases
Name Of Mediator Fili	ng Notice	Mediator	Ema	il Address
Mediator Address		Mediator	Tele	phone No.
		Mediator	Fax	No
above-captioned statement shall be Potential for I	I case, notifies the Court of the mediator's consistent with the mediator's duty of confider ack of competency under Standard 1 of the pias, prejudice, or partiality under Standard flict of interest under Standard 7 of the Standard to the integrity of the mediation process.	s withdrawal/disqua ntiality set out in Stan ne Standards of Pro d 2 of the Standard andards of Profess	alific dard ofes ds o	f Professional Conduct for Mediators
		SIGNATURE		
Date	Name Of Mediator		Sig	nature Of Mediator
		ORDER	Щ	
		UKDEK		
☐ The Court he	ereby orders:			
•	have days from the date of thinction or cannot agree, the Court shall app	-		ourt of their selection of a substitute mediator. If the ator.
Date	Name Of Senior Resident Superior Court Judge Or	Designee		nature Of Senior Resident Superior Court Judge Or Designee
Date	Name Of Chief District Court Judge Or Designee		Sig	nature Of Chief District Court Judge Or Designee

	ate a copy of the foregoing Notice Of Withdrawal/Disqualification Of Mediator be parties or attorneys named below at the addresses specified by placing a aid.	
Name And Address Of Party Or Attorney	Name And Address Of Party Or Attorney	
Name And Address Of Party Or Attorney	Name And Address Of Party Or Attorney	
Name And Address Of Party Or Attorney	Name And Address Of Party Or Attorney	
Name And Address Of Party Or Attorney	Name And Address Of Party Or Attorney	
Name And Address Of Party Or Attorney	Name And Address Of Party Or Attorney	

Signature Of Mediator

CERTIFICATE OF SERVICE

Date

Name Of Mediator