STATE OF NORTH CAROLINA	IN THE GENERAL COURT OF JUSTICE DISTRICT COURT DIVISION
COUNTY OF WAKE	FILE NO:
Name and Address of Plaintiff	
Phone No:	CUSTODY MEDIATION
Name and Address of Plaintiff's Attorney	COVER SHEET
Attorney's Phone No:	(THIS BLOCK TO BE COMPLETED <u>ONLY</u> BY THE CC) For Court Use Only
	Assigned Judge:
VERSUS	
Name and Address of Defendant	
Phone No:	ATTACH A COPY OF ALL
	DOMESTIC VIOLENCE
Name and Address of Defendant's Attorney	RESTRAINING ORDERS (CIVIL OR CRIMINAL), IF ANY
Attorney's Phone No:	
Have the parties previously attended a group orientation? [] YES [] NO	
Have the parties previously attended custody visitation mediation? [] YES [] NO	
Is there a pending or resolved civil or criminal domestic violence case involving the same parties in NC or any other State? [] YES [] NO If yes, attach a copy of all civil or criminal domestic violence restraining orders.	
Signature of Party Filing Cover Sheet	
Note: MUST BE FILLED OUT COMPLETELY	