

**Claim and Order for Payment
for Court Appointed Mediators Services under Special Authorization of
the Galveston County Mediation Board**

To: Galveston County, Texas

Date of Mediation: _____
(Filed on/before 30 Days from Date of Mediation)

Style of Suit: _____

Case Number: _____

Case Type: (MUST BE CHECKED)

- | | | |
|--|---|---|
| <input type="checkbox"/> CPSCASE- PTM MED. MAX
\$800 PER SESSION | <input type="checkbox"/> 2 HR. TEMP APPROVED
SUBSIDIZED MEDIATION
ORDER MAX \$400 PER SESSION | <input type="checkbox"/> CPS TEMP ORDER
MEDIATION MAX \$800 PER
SESSION |
| <input type="checkbox"/> TEMP ORDER MEDIATION
RESULTING IN FINAL ORDER
(MAX \$800 PER SESSION) | <input type="checkbox"/> FINAL ORDER MEDIATION
(MAX \$800 LESS AMT REC'D
FROM PARTIES) | |

Mediator's Certification

By my signature below, I certify that I served as a mediator of the above-referenced cause on the specified date. I further certify:

- I was the court appointed mediator or the appointed mediator asked me to substitute.
- I mediated in Galveston County or via Remote Video(IF AUTHORIZED)
- The parties were approved for subsidized mediation: []temp or []final.
- The mediation was [] was not [] successful; or [] recessed to reconvene

that the below calculation:

- (1) is just and correct;
- (2) is made in accordance with the rules for Mediation Service of Galveston County, and under Title 7 of Civil Practice and Remedies Code, Chapter 154;
- (3) reflects any and all funds received for mediation services by the parties and
- (4) is for unpaid services.

CLAIM AMOUNT

_____ [1 to 4] X \$200 - (_____) [Money received] = \$ _____

\$200 PER HOUR, NOT TO EXCEED \$800 FOR FINAL MEDIATION PER SESSION

By: _____
Mediator Name

Signed: _____
Mediator Signature

Address: _____
Number and Street City and State Zip Code

Email address: _____

EIN or Taxpayer ID: _____ Tel: _____

Approval and Order for Payment to Mediator

The Court FINDS, CERTIFIES and APPROVES the Mediator's Requested Claim Amount as set forth above because it complies with the Galveston County Mediation Board's rules and procedures for compensation for mediation services provided in a suit pending before this Court. It is further ORDERED that within 30 days, Galveston County, Texas, its auditor or other representative, shall pay to the Mediator, the Mediator's Requested Claim Amount from Galveston County's from the Mediation Funds Account.

SIGNED this _____ day of _____, 20_____.

Presiding Judge