

# STATE OF VERMONT

**SUPERIOR COURT**

**CIVIL DIVISION**

**Unit**

**Docket No.:**

*Plaintiff(s)*

VS.

*Defendant(s)*

## ALTERNATE DISPUTE RESOLUTION REPORT

Date of ADR Session \_\_\_\_\_ Starting Time \_\_\_\_\_ Finishing Time \_\_\_\_\_

1. Please indicate the names and addresses of all persons participating in the ADR Session. If either party is a corporation or company, please indicate the name and title of the representative. **Identify with an asterisk (\*) the representative of each party who had decision making authority.**

Name	Representative & Title If Applicable	Street Address	City, State, Zip
<i>Plaintiff</i>			
<i>Plaintiff's Counsel</i>			
<i>Defendant</i>			
<i>Defendant's Counsel</i>			
<i>Insurance Carrier</i>			
<i>Defendant</i>			
<i>Defendant's Counsel</i>			
<i>Insurance Carrier</i>			
<i>Other</i>			

2. Please summarize any substitute arrangement made regarding attendance at the ADR Session.

\_\_\_\_\_  
\_\_\_\_\_

3. Were all appropriate parties in attendance? ☐ Yes ☐ No If No, who failed to appear? \_\_\_\_\_

4. Were all parties prepared & did all participate in good faith? ☐ Yes ☐ No

If No, who did not comply? \_\_\_\_\_

5. Did each party have a representative present with sufficient authority to participate in good faith to settle the dispute at the time of the ADR Session? ☐ Yes ☐ No

6. Did the case settle? ☐ Yes ☐ No (If settlement was reached, please append the agreement of the parties.)

7. If the case did not settle:

A. Can the scope of this dispute be narrowed by stipulation of the parties? If so, please describe:

\_\_\_\_\_  
\_\_\_\_\_

B. Did the parties agree to a further ADR session? ☐ Yes ☐ No ☐ N/A

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Neutral (signature) \_\_\_\_\_