Court ☐ District ☐ County ☐ Juvenile Colorado County: _____ Court Address: _____	
Petitioner/Plaintiff: _____ &. Respondent/Defendant: _____ &. Other Parties: _____	**Court Use Only**
My Name: _____ Address: _____ _____ Phone _____ Fax: _____ Email: _____ Atty. Reg.#: _____	Case Number: _____ Division: _____ Courtroom: _____

Certificate of Mediation/ADR Compliance

1. About Me

My name is _____.

I am the: ☐ Mediator. ☐ Petitioner. ☐ Respondent/Co-Petitioner.

2. Date of Mediation

(check one)

☐ Mediation was held on *(enter date)* _____.

The Mediator was *(mediator name/company)* _____.

☐ Mediation was not held.

Because:

☐ The mediator determined mediation was not appropriate. *(ADRI)*

☐ The *(enter party)* _____ did not pay the mediator's deposit.

☐ Other: _____.

3. Outcome

What was the result of mediation?

☐ Fully Resolved. *(ADRF)*

- The mediator gave the parties a written summary of the agreement.
- The *(enter party)* _____ will file the signed agreement with the Court.

☐ Partially Resolved. *(ADRP)*

- The mediator listed the remaining issues.
- The mediator gave the parties a written summary of the agreement.
- The *(enter party)* _____ will file the signed agreement with the Court.

☐ Not Resolved. *(ADRN)*

- No issues were resolved.

☐ Held and Continued. *(CADR)*

- Another session is scheduled for *(enter date)* _____.

☐ Other: _____.

4. Certificate of Service

I certify that on *(enter date)* _____, I gave a copy of this document to *(name of people you sent it to)* _____ by:

☐ Hand Delivery

☐ Colorado Courts E-Filing *(where available)* *(www.jbits.courts.state.co.us/efiling)*

☐ Email or Fax to: _____

☐ Mail, through the United States Postal Service, addressed to:

_____

_____

_____

5. Sign and Date

_____ _____

Signature Dated