

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY

SOUTHERN JUDICIAL CIRCUIT  
ALTERNATIVE DISPUTE RESOLUTION PROGRAM

VOUCHER FOR COMPENSATION OF APPOINTED  
NEUTRAL

§

\_\_\_\_\_  
Plaintiff,

§ Civil Action File No. \_\_\_\_\_

Vs.

§

\_\_\_\_\_  
Defendant.

§

NEUTRAL'S CERTIFICATION

I certify that a Alternative Dispute Resolution, ("**ADR**"), session was conducted with the parties named above on \_\_\_\_\_, with the following results:

\_\_\_\_\_ A full agreement

\_\_\_\_\_ No agreement

\_\_\_\_\_ Other

Request is hereby made for compensation in the amount of \$ \_\_\_\_\_ for **ADR** services rendered. Program compensation is \$75.00 per hour per party.

(1) Time spent in mediation: \_\_\_\_\_

(2) Time spent in preparation: \_\_\_\_\_

(3) Expenses: \_\_\_\_\_  
(Attach detailed statement)

\_\_\_\_\_  
Neutral's Signature

\_\_\_\_\_  
Printed or Typed Name

\_\_\_\_\_  
P.O. Box or Street Address

\_\_\_\_\_  
City, State, and Zip Code

**AUTHORIZATION FOR PAYMENT**

Approved for payment in the amount of \$ \_\_\_\_\_ to the above-named Neutral.

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
**Tim C. Hendrick**  
Administrator, ADR Program  
Southern Judicial Circuit