

**Vermont Agricultural Mediation Program
Mediation Report**

Name of Dispute _____

Agency Involved USDA FSA____ NRCS ____ RD ____

Other (please specify) _____

Date of Mediation _____ Location of Mediation _____

Mediator _____

Outcome:

Full Agreement Reached

Partial Agreement Reached

No Agreement Reached/Mediation Completed

Mediator's Signature _____ Date _____