THE RESOLUTION OF LEGAL FEE DISPUTES PROGRAM
of the CONNECTICUT BAR ASSOCIATION

STATEMENT OF FACTS, WITNESSES, AND RELIEF

Please type or print clearly. Additional pages may be attached as needed.

Petitioner(s): ____________________________________________________________

Respondent(s): __________________________________________________________

CBA File Number (if known): __________

Name of party completing statement: __________________________________________

Check one: ____________________________  Petitioner  ____________________________  Respondent

I. Description of Facts: Provide a concise description of the facts that led to this fee dispute.

II. Witnesses: List all parties and people who are important to resolving this dispute. For each person listed, state their name, contact information, and reason they are important to the dispute.

III. Relief Requested: Provide a concise statement of the outcome or relief that you are requesting.

Party Signature: ____________________________  Print Name: ____________________________  Date: ______________