

CONFIDENTIAL/SETTLEMENT WORK SHEET

TITLE OF PROCEEDINGS _____

-----X

VS.

INDEX NO.: _____

DATE NOTE OF ISSUE FILED: _____

DESCRIBE TORT: _____

-----X

THE PARTIES & ATTORNEYS OF RECORD¹

PLAINTIFF(S)

1. _____
(Name of Plaintiff)

ATTORNEY OF RECORD
OFFICE ADDRESS AND PHONE NUMBER

2. _____
(Name of Plaintiff)

ATTORNEY OF RECORD
OFFICE ADDRESS AND PHONE NUMBER

3. _____
(Name of Plaintiff)

ATTORNEY OF RECORD
OFFICE ADDRESS AND PHONE NUMBER

DEFENDANT(S)

1. _____
(Name of Defendant)

ATTORNEY OF RECORD
OFFICE ADDRESS AND PHONE NUMBER

Insurance Carrier _____
Policy Limits _____
Ins.Contact Person _____
Phone No. _____

2. _____
(Name of Defendant)

ATTORNEY OF RECORD
OFFICE ADDRESS AND PHONE NUMBER

Insurance Carrier _____
Policy Limits _____
Ins.Contact Person _____
Phone No. _____

3. _____
(Name of Defendant)

ATTORNEY OF RECORD
OFFICE ADDRESS AND PHONE NUMBER

Insurance Carrier _____
Policy Limits _____
Ins.Contact Person _____
Phone No. _____

CONFERENCE NOTES BEGIN ON THE NEXT PAGE

¹ALL PARTIES AND THE ATTORNEYS OF RECORD MUST BE IDENTIFIED ON THIS PAGE.
"COVERING" COUNSEL SHALL ONLY BE IDENTIFIED IN THE PROGRESS NOTES, INFRA.

Summary Sheet

PLAINTIFFS	DOB	OCCUPATION	LOST TIME
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

SHORT DESCRIPTION OF TORT ALLEGED: _____

OCCURRENCE DATE: _____ **TIME:** _____ **LOCATION:** _____

PLAINTIFF'S VERSION OF OCCURRENCE: _____

DEFENDANT'S VERSION OF OCCURRENCE: _____

INJURIES AND TREATMENT: _____

PAST AND FUTURE DAMAGES: _____

LIENS: _____

PLAINTIFF(S) DEMANDS: _____

DEFENDANT(S) OFFERS: _____

SETTLEMENT CONFERENCE PROGRESS NOTES

DATE AND ACTION TAKEN: _____

APPEARANCES:

For Plaintiff: _____

For Defendant: _____

DATE AND ACTION TAKEN: _____

APPEARANCES:

For Plaintiff: _____

For Defendant: _____

