## OFFICE OF THE EXECUTIVE SECRETARY SETTLEMENT CONFERENCE REPORT FORM

Settlement Judge:							
Case Style:							
Referring Court:							
Date Case Filed:			Date Case Referred to Settlement Conference:				
Date of Settlement	t Confer	ence:					
Location of Settler	ment Co	nference:					
Length of Settlement Conference:			Hours	Time Spent Preparing for Conference: Hours			
Counsel Present? Defendant Plaintiff							
Agreement Reache		After Conference/Before Trial:					
Exit Surveys Prov	ided to I	Parties?					
Case Type: (Please be as specific as possible. Only use Miscellaneous if no other category can apply)							
Tort/Personal Injury:		Assault Auto Accident Fraud Medical Malpractice					
		Product Li	ability	Slip Fall	L	ibel Defamation	
C		Other PI (	Other PI (Type:				
<b>Domestic Relations:</b>		Divorce	Probate	Adult (	Guardian	ship	
Other Domes	tic (Typ	e:					)
Commercial:	Debt	Cons	truction	Contrac	ct I	Landlord/Tenant	Condemnation
Real Estate	Other Commercial (Type:						
Miscellaneous:	(Type:						)
Comments:							

Please return this form with your invoice for payment to:

Dispute Resolution Services, 100 North 9<sup>th</sup> Street, Richmond, Virginia 23219